

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

IOWA DEMOCRATIC PARTY

ADDRESS (number and street)

5661 Fleur Drive

Check if different
than previously
reported. (ACC)

Des Moines

IA

50321

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00035600

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report(Q1)July 15
Quarterly Report(Q2)October 15
Quarterly Report(Q3)January 31
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

06

01

2004

through

06

30

2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Ken Sagar

Signature of Treasurer

Electronically Filed by Ken Sagar

Date

06

14

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
IOWA DEMOCRATIC PARTY

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	4

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	4

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		166393.81
(b) Cash on Hand at Beginning of Reporting Period	270280.04	
(c) Total Receipts (from Line 19)	300773.86	997505.85
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	571053.90	1163899.66
7. Total Disbursements (from Line 31)	328456.66	921302.42
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	242597.24	242597.24
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	1200.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

IOWA DEMOCRATIC PARTY

Report Covering the Period:

From:

M M
0 6D D
0 1Y Y Y Y
2 0 0 4

To:

M M
0 6D D
3 0Y Y Y Y
2 0 0 4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	100827.00	734610.49
(i) Itemized (use Schedule A)	52529.70	339194.08
(ii) Unitemized	153356.70	511585.06
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	750.00	2230.00
(b) Political Party Committees	56851.00	92863.24
(c) Other Political Committees (such as PACs)	210957.70	606678.30
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤		
12. Transfers From Affiliated/Other Party Committees	40125.00	148674.55
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	252.94	17171.10
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	-3000.00	-3000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1638.22	132194.80
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	50800.00	95787.10
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	50800.00	95787.10
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	300773.86	997505.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	249973.86	901718.75

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	29395.29	110157.23
(ii) Non-Federal Share.....	52129.90	194365.33
(b) Other Federal Operating Expenditures.....	18856.67	35406.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	100381.86	339929.41
22. Transfers to Affiliated/Other Party Committees.....	8051.00	10616.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	2500.00	2500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	25150.00	40650.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	27650.00	43150.00
29. Other Disbursements.....	73144.70	386670.02
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	717.02
(ii) "Levin" Share	0.00	1274.72
(b) Federal Election Activity Paid Entirely With Federal Funds	119229.10	138945.25
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	119229.10	140936.99
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	328456.66	921302.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	276326.76	725662.37

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	210957.70	606678.30
34. Total Contribution Refunds (from Line 28(d))	27650.00	43150.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	183307.70	563528.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	48251.96	145564.08
37. Offsets to Operating Expenditures (from Line 15, page 3)	252.94	17171.10
38. Net Operating Expenditures (subtract Line 37 from Line 36)	47999.02	128392.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Brent Robert Appel

Mailing Address 1087 180th Ave

City State Zip Code
 Ackworth IA 50001-9653

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wandro, Baer and Casper,
P.C.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 4 / 2 0 0 4

Transaction ID: C2851

Amount of Each Receipt this Period

1250.00

B. Full Name (Last, First, Middle Initial)

Brent Robert Appel

Mailing Address 1087 180th Ave

City State Zip Code
 Ackworth IA 50001-9653

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wandro, Baer and Casper,
P.C.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 4 / 2 0 0 4

Transaction ID: C2850

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

Brent Robert Appel

Mailing Address 1087 180th Ave

City State Zip Code
 Ackworth IA 50001-9653

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wandro, Baer and Casper,
P.C.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 4 / 2 0 0 4

Transaction ID: C2849

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 John L Ayers

Mailing Address 4301 Park Ave
 Unit 140

City State Zip Code
 Des Moines IA 50321-3453

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Self

Occupation
 Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 7 / 2 0 0 4

Transaction ID: C2603

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
 Eric Lee Bakker

Mailing Address 300 Walnut St
 Unit 114

City State Zip Code
 Des Moines IA 50309-2242

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 State of Iowa

Occupation
 Chief of State - Senate Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 4

Transaction ID: C2992

Amount of Each Receipt this Period

51.00

C. Full Name (Last, First, Middle Initial)
 Robert J Baudino, JR

Mailing Address 5410 Shriver Ave

City State Zip Code
 Des Moines IA 50312-2046

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Baudino Law Firm

Occupation
 Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 4

Transaction ID: C2882

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1551.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Robert J Baudino, JR
Mailing Address 5410 Shriver Ave

City State Zip Code
Des Moines IA 50312-2046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baudino Law Firm

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C2881

Amount of Each Receipt this Period

40.00

B. Full Name (Last, First, Middle Initial)
Daryl E Beall
Mailing Address 1928 N 22nd St

City State Zip Code
Fort Dodge IA 50501-7863

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 4

Transaction ID: C2659

Amount of Each Receipt this Period

400.00

C. Full Name (Last, First, Middle Initial)
Laura Ruth Belin
Mailing Address 1705 Plaza Cir

City State Zip Code
Windsor Heights IA 50322-5760

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Journalist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2301.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 0 4

Transaction ID: C2725

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1440.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 210

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Laura Ruth Belin Mailing Address 1705 Plaza Cir City Windsor Heights State IA Zip Code 50322-5760 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Journalist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2301.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 8 / 2 0 0 4 Transaction ID: C2959 Amount of Each Receipt this Period 51.00
B. Full Name (Last, First, Middle Initial) Kenneth A Birt Mailing Address 303 Hickory Dr City Ames State IA Zip Code 50014-3430 FEC ID number of contributing federal political committee. C Name of Employer MidAmerican Occupation Electrical Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 4 Transaction ID: C2442 Amount of Each Receipt this Period 500.00
C. Full Name (Last, First, Middle Initial) Ray Michael Blase Mailing Address 913 NE 34th St City Ankeny State IA Zip Code 50021-9610 FEC ID number of contributing federal political committee. C Name of Employer Polk County, Iowa Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 7 / 2 0 0 4 Transaction ID: C2726 Amount of Each Receipt this Period 150.00
SUBTOTAL of Receipts This Page (optional) ▶		701.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Michael Thomas Blouin

Mailing Address 300 Walnut - No 12

City State Zip Code
Des Moines IA 50309

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
Director of Economic Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C2885

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Suzanne Lee Blouin

Mailing Address 300 Walnut St
Unit 12

City State Zip Code
Des Moines IA 50309-2239

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
Boards and Commissions Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 4

Transaction ID: C2961

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Brad Joseph Brady

Mailing Address 4154 Brookside Dr

City State Zip Code
Marion IA 52302-9327

FEC ID number of contributing
federal political committee.

C

Name of Employer
Attorney

Occupation
Brady & O'Shea PC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 4

Transaction ID: C2617

Amount of Each Receipt this Period

1200.00

SUBTOTAL of Receipts This Page (optional)

2450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 210

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Mark William Brandsgard Mailing Address 513 Colonial Cir City State Zip Code West Des Moines IA 50265-3733 FEC ID number of contributing federal political committee. C Name of Employer Iowa House of Representatives Occupation Legislative Staff Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> Transaction ID: C2445 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">240.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	1		2	0	0	4	240.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		0	1		2	0	0	4																							
240.00																																
B. Full Name (Last, First, Middle Initial) Mark William Brandsgard Mailing Address 513 Colonial Cir City State Zip Code West Des Moines IA 50265-3733 FEC ID number of contributing federal political committee. C Name of Employer Iowa House of Representatives Occupation Legislative Staff Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> Transaction ID: C2727 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">150.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	0	4	150.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		1	7		2	0	0	4																							
150.00																																
C. Full Name (Last, First, Middle Initial) Florence D Buhr Mailing Address 4127 30th St City State Zip Code Des Moines IA 50310-5946 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> Transaction ID: C3107 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">30.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	6		2	0	0	4	30.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		2	6		2	0	0	4																							
30.00																																

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Brasley Lloyd Bullock

Mailing Address PO Box 515

City

Waterloo

State

IA

Zip Code

50704-0515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired - Teacher

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 4

Transaction ID: C2570

Amount of Each Receipt this Period

400.00

B. Full Name (Last, First, Middle Initial)

Brasley Lloyd Bullock

Mailing Address PO Box 515

City

Waterloo

State

IA

Zip Code

50704-0515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired - Teacher

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C3057

Amount of Each Receipt this Period

30.00

C. Full Name (Last, First, Middle Initial)

Brasley Lloyd Bullock

Mailing Address PO Box 515

City

Waterloo

State

IA

Zip Code

50704-0515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired - Teacher

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C3056

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

460.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A.

Full Name (Last, First, Middle Initial)

Max Burkey

Mailing Address 4710 Lakeview Dr

City

Des Moines

State

IA

Zip Code

50311-3325

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 0 4

Transaction ID: C2756

Amount of Each Receipt this Period

625.00

B.

Full Name (Last, First, Middle Initial)

John C Cacciatore

Mailing Address 1700 Casady Dr

City

Des Moines

State

IA

Zip Code

50315-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation

State-Federal Liaison

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1340.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 2 / 2 0 0 4

Transaction ID: C2678

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

John C Cacciatore

Mailing Address 1700 Casady Dr

City

Des Moines

State

IA

Zip Code

50315-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation

State-Federal Liaison

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1340.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 0 4

Transaction ID: C2728

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1775.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. John C Cacciatore

Mailing Address 1700 Casady Dr

City State Zip Code
Des Moines IA 50315-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State-Federal Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1340.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C2886

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. David L Campbell

Mailing Address 667 NW 4th Court

City State Zip Code
Saylorville IA 50313

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 2 / 2 0 0 4

Transaction ID: C2679

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Michael J Carroll

Mailing Address 2100 Westown Pkwy
Ste 202

City State Zip Code
West Des Moines IA 50265-1539

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 0 4

Transaction ID: C2757

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

490.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Thomas G Carsner

Mailing Address 1627 College Court Pl

City State Zip Code
Iowa City IA 52245-4417

FEC ID number of contributing
federal political committee.

C

Name of Employer
 American College Testing

Occupation
 Editor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 9 / 2 0 0 4

Transaction ID: C2644

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Alicia I Claypool

Mailing Address 5754 Gallery Ct

City State Zip Code
West Des Moines IA 50266-6629

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Information Requested

Occupation
 Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 8 / 2 0 0 4

Transaction ID: C2963

Amount of Each Receipt this Period

51.00

Full Name (Last, First, Middle Initial)

C. Roxanne B Conlin

Mailing Address 2900 Southern Hills Cir

City State Zip Code
Des Moines IA 50321-1458

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self

Occupation
 Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 4

Transaction ID: C2888

Amount of Each Receipt this Period

417.00

SUBTOTAL of Receipts This Page (optional)

668.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Michael W Connolly

Mailing Address 2600 Renaissance Dr

City State Zip Code
Dubuque IA 52001-3087

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y
06 08 2004

Transaction ID: C2619

Amount of Each Receipt this Period

750.00

B. Full Name (Last, First, Middle Initial)

Elizabeth Ann Coyte

Mailing Address PO Box C

City State Zip Code
Redfield IA 50233-0903

FEC ID number of contributing
federal political committee.

C

Name of Employer
Redfield Medical Center

Occupation
Physician's Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y
06 14 2004

Transaction ID: C2701

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)

Bill Crews

Mailing Address 637 Constitution Ave NE

City State Zip Code
Washington DC 20002-6035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Environmental Protection
Agenc

Occupation
Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
06 02 2004

Transaction ID: C2549

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Bill Crews Mailing Address 637 Constitution Ave NE City State Zip Code Washington DC 20002-6035 FEC ID number of contributing federal political committee. C Name of Employer Environmental Protection Agency Occupation Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 0 4 Transaction ID: C2730 Amount of Each Receipt this Period 200.00
B. Full Name (Last, First, Middle Initial) Lynn G Cutler Mailing Address 4335 37th St NW City State Zip Code Washington DC 20008-3108 FEC ID number of contributing federal political committee. C Name of Employer Holland & Knight LLP Occupation Policy Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 4 Transaction ID: C2551 Amount of Each Receipt this Period 250.00
C. Full Name (Last, First, Middle Initial) Lynn G Cutler Mailing Address 4335 37th St NW City State Zip Code Washington DC 20008-3108 FEC ID number of contributing federal political committee. C Name of Employer Holland & Knight LLP Occupation Policy Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 0 4 Transaction ID: C2731 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Judy McCoy Davis

Mailing Address **2880 Grand Ave**
Apt 304

City State Zip Code
Des Moines IA 50312-4274

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

06 / 21 / 2004

Transaction ID: C2777

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Lou Debaca

Mailing Address **2237 N Trenton St**

City State Zip Code
Arlington VA 22207-4038

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Dept of Justice

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 02 / 2004

Transaction ID: C2552

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Margaret A Delisser

Mailing Address **6915 Ridgewood Ave**

City State Zip Code
Chevy Chase MD 20815-5149

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hogan & Hartson LLP

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 21 / 2004

Transaction ID: C2778

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Bette J Dilley

Mailing Address 106 Geneva Dr

City State Zip Code
 Oskaloosa IA 52577-3007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 6 / 2 0 0 4

Transaction ID: C3109

Amount of Each Receipt this Period

30.00

B. Full Name (Last, First, Middle Initial)

Sandy L Dockendorff

Mailing Address 22921 135th St

City State Zip Code
 Danville IA 52623-9096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 4

Transaction ID: C2889

Amount of Each Receipt this Period

40.00

C. Full Name (Last, First, Middle Initial)

Sandy L Dockendorff

Mailing Address 22921 135th St

City State Zip Code
 Danville IA 52623-9096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 4

Transaction ID: C2890

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Sandy L Dockendorff Mailing Address 22921 135th St City Danville State IA Zip Code 52623-9096 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 4 Transaction ID: C3060 Amount of Each Receipt this Period 30.00
B. Full Name (Last, First, Middle Initial) Sandy L Dockendorff Mailing Address 22921 135th St City Danville State IA Zip Code 52623-9096 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 4 Transaction ID: C3110 Amount of Each Receipt this Period 30.00
C. Full Name (Last, First, Middle Initial) Sandy L Dockendorff Mailing Address 22921 135th St City Danville State IA Zip Code 52623-9096 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 4 Transaction ID: C2944 Amount of Each Receipt this Period 70.00
SUBTOTAL of Receipts This Page (optional) ▶		130.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Robert T Dodder		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 4
Mailing Address 216 Cloverdale Dr		Transaction ID: C2554
City Council Bluffs	State IA	Zip Code 51503-5317
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

B. Full Name (Last, First, Middle Initial) Robert T Dodder		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 4
Mailing Address 216 Cloverdale Dr		Transaction ID: C2779
City Council Bluffs	State IA	Zip Code 51503-5317
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

C. Full Name (Last, First, Middle Initial) Robert E Dvorsky		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 4
Mailing Address 412 6th St		Transaction ID: C2464
City Coralville	State IA	Zip Code 52241-2511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer State of Iowa	Occupation State Senator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Robert E Dvorsky

Mailing Address 412 6th St

City State Zip Code
 Coralville IA 52241-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer
 State of Iowa

Occupation
 State Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 4

Transaction ID: C2891

Amount of Each Receipt this Period

65.00

B. Full Name (Last, First, Middle Initial)

Lloyd John Eckhart

Mailing Address 943 6th St SE

City State Zip Code
 Mason City IA 50401-4261

FEC ID number of contributing
federal political committee.

C

Name of Employer
 North IA Area Comm. Colle-
 ge

Occupation
 Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 1 / 2 0 0 4

Transaction ID: C2465

Amount of Each Receipt this Period

240.00

C. Full Name (Last, First, Middle Initial)

Lloyd John Eckhart

Mailing Address 943 6th St SE

City State Zip Code
 Mason City IA 50401-4261

FEC ID number of contributing
federal political committee.

C

Name of Employer
 North IA Area Comm. Colle-
 ge

Occupation
 Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 0 4

Transaction ID: C3035

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

335.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Katherine L Eckhouse Mailing Address 5320 Robertson Dr City State Zip Code Des Moines IA 50312-2134 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Business Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4 Transaction ID: C2996 Amount of Each Receipt this Period 500.00
B. Full Name (Last, First, Middle Initial) Susan L Ekstrom Mailing Address 4710 Lakeview Dr City State Zip Code Des Moines IA 50311-3325 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 725.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 4 Transaction ID: C2759 Amount of Each Receipt this Period 625.00
C. Full Name (Last, First, Middle Initial) Mark C Engelbrecht Mailing Address 3930 Grand Ave # A-405 City State Zip Code Des Moines IA 50312-3519 FEC ID number of contributing federal political committee. C Name of Employer Iowa State University Occupation Professor and Dean Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 4 Transaction ID: C2572 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)

2125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Thomas C Engelmann
Mailing Address 4552 N Main St

City State Zip Code
Davenport IA 52806-4031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 4

Transaction ID: C2715

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Suzanne V Engman
Mailing Address 2919 SW 30th St

City State Zip Code
Des Moines IA 50321-1412

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 0 4

Transaction ID: C2670

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Sandra C Eskin
Mailing Address 1047 Woodlawn Ave

City State Zip Code
Iowa City IA 52245-4447

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 4

Transaction ID: C2467

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Steven L Falck

Mailing Address 1305 Locust St
Apt 8

City State Zip Code
Stanley IA 50671-9539

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
Legislative Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 4

Transaction ID: C2964

Amount of Each Receipt this Period

200.00

B. Full Name (Last, First, Middle Initial)

Thomas Martin Fine

Mailing Address PO Box 64

City State Zip Code
Braddyville IA 51631-0064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Property Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 0 4

Transaction ID: C2645

Amount of Each Receipt this Period

400.00

C. Full Name (Last, First, Middle Initial)

Beth Flansburg

Mailing Address 2501 35th St

City State Zip Code
Des Moines IA 50310-4552

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lawyer, Palmer & Flansberg

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 0 4

Transaction ID: C2760

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Romaine Henry Foege

Mailing Address PO Box 128

City State Zip Code
 Mount Vernon IA 52314-0128

FEC ID number of contributing
federal political committee.

C

Name of Employer
 State of Iowa

Occupation
 State Legislator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 8 / 2 0 0 4

Transaction ID: C2620

Amount of Each Receipt this Period

200.00

B. Full Name (Last, First, Middle Initial)
 Romaine Henry Foege

Mailing Address PO Box 128

City State Zip Code
 Mount Vernon IA 52314-0128

FEC ID number of contributing
federal political committee.

C

Name of Employer
 State of Iowa

Occupation
 State Legislator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 4

Transaction ID: C3065

Amount of Each Receipt this Period

30.00

C. Full Name (Last, First, Middle Initial)
 Cynthia Forbes

Mailing Address 12816 Cardinal Ln

City State Zip Code
 Urbandale IA 50323-2154

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Polk County

Occupation
 Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 1 / 2 0 0 4

Transaction ID: C2468

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Cynthia Forbes

Mailing Address 12816 Cardinal Ln

City State Zip Code
 Urbandale IA 50323-2154

FEC ID number of contributing
federal political committee.

C

Name of Employer
Polk County

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 9 / 2 0 0 4

Transaction ID: C2646

Amount of Each Receipt this Period

40.00

B. Full Name (Last, First, Middle Initial)

Cynthia Forbes

Mailing Address 12816 Cardinal Ln

City State Zip Code
 Urbandale IA 50323-2154

FEC ID number of contributing
federal political committee.

C

Name of Employer
Polk County

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 6 / 2 0 0 4

Transaction ID: C3116

Amount of Each Receipt this Period

30.00

C. Full Name (Last, First, Middle Initial)

Holmes Foster

Mailing Address 13621 Bay Hill Dr

City State Zip Code
 Des Moines IA 50325-8565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 4 / 2 0 0 4

Transaction ID: C2857

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1070.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Eugene S Fraise
 Mailing Address 1699 280th Ave

City State Zip Code
Fort Madison IA 52627-9557

FEC ID number of contributing
federal political committee.

C

Name of Employer
 State of Iowa

Occupation
 State Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 6 / 2 0 0 4

Transaction ID: C3117

Amount of Each Receipt this Period

60.00

B. Full Name (Last, First, Middle Initial)
 Nathan T Fredrickson

Mailing Address 440 7th Ave
 Unit 6164

City State Zip Code
Mountain Home Afb ID 83648-6164

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Information Requested

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 4 / 2 0 0 4

Transaction ID: C2703

Amount of Each Receipt this Period

1500.00

C. Full Name (Last, First, Middle Initial)
 Edward Benjamin Friedmann, JR

Mailing Address PO Box C

City State Zip Code
Redfield IA 50233-0903

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Redfield Clinic

Occupation
 Physician's Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 4 / 2 0 0 4

Transaction ID: C2704

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2060.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Edward Benjamin Friedmann, JR

Mailing Address PO Box C

City State Zip Code
 Redfield IA 50233-0903

FEC ID number of contributing
federal political committee.

C

Name of Employer
Redfield Clinic

Occupation
Physician's Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 7 / 2 0 0 4

Transaction ID: C2734

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Robert D Fulton

Mailing Address 141 Hillcrest Rd

City State Zip Code
 Waterloo IA 50701-4205

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 8 / 2 0 0 4

Transaction ID: C2621

Amount of Each Receipt this Period

750.00

C. Full Name (Last, First, Middle Initial)

Eileen M Gannon

Mailing Address 2923 SW 30th St

City State Zip Code
 Des Moines IA 50321-1412

FEC ID number of contributing
federal political committee.

C

Name of Employer
Solomon, Smith, Barney

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 8 / 2 0 0 4

Transaction ID: C2761

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Matt Leo Gannon		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 4
Mailing Address 2701 Calvert St NW Apt 403		Transaction ID: C2555 Amount of Each Receipt this Period 500.00
City Washington	State DC	
Zip Code 20008-2618		
FEC ID number of contributing federal political committee. C		
Name of Employer Arnold & Potter	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

B. Full Name (Last, First, Middle Initial) Matt Leo Gannon		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 0 4
Mailing Address 2701 Calvert St NW Apt 403		Transaction ID: C2736 Amount of Each Receipt this Period 1000.00
City Washington	State DC	
Zip Code 20008-2618		
FEC ID number of contributing federal political committee. C		
Name of Employer Arnold & Potter	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

C. Full Name (Last, First, Middle Initial) William J Gannon		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 4
Mailing Address PO Box 167 205 E Bluff St		Transaction ID: C2648 Amount of Each Receipt this Period 200.00
City Mingo	State IA	
Zip Code 50168-0167		
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Farmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1387.00	

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
William J Gannon

Mailing Address PO Box 167
205 E Bluff St

City State Zip Code
Mingo IA 50168-0167

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1387.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 9 / 2 0 0 4

Transaction ID: C2770

Amount of Each Receipt this Period

102.00

B. Full Name (Last, First, Middle Initial)
William J Gannon

Mailing Address PO Box 167
205 E Bluff St

City State Zip Code
Mingo IA 50168-0167

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1387.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 4

Transaction ID: C2858

Amount of Each Receipt this Period

800.00

C. Full Name (Last, First, Middle Initial)
Anne Marie Garrison

Mailing Address 4341 Grand Ave

City State Zip Code
Des Moines IA 50309-2233

FEC ID number of contributing
federal political committee.

C

Name of Employer
Galligan Law Firm

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 4

Transaction ID: C2780

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

1142.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

William E Gluba

Mailing Address 2421 N Gaines St

City State Zip Code
Davenport IA 52804-1910

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 4

Transaction ID: C2782

Amount of Each Receipt this Period

40.00

B. Full Name (Last, First, Middle Initial)

William E Gluba

Mailing Address 2421 N Gaines St

City State Zip Code
Davenport IA 52804-1910

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 4

Transaction ID: C2783

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Penelope S Guyler

Mailing Address 323 E Leach Ave

City State Zip Code
Des Moines IA 50315-3647

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mercy Medical Center

Occupation
Registered Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 4

Transaction ID: C2785

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

590.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Fredd J Haas		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 4
Mailing Address 4417 46th St		Transaction ID: C2786
City Des Moines	State IA	Zip Code 50310-3741
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Kim M Hagemann		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 4
Mailing Address 2806 NW 17th Ct		Transaction ID: C3120
City Ankeny	State IA	Zip Code 50023-1091
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Pioneer Hi-Bred	Occupation Patent Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

C. Full Name (Last, First, Middle Initial) Kathleen Brigid Halloran		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 4
Mailing Address 825 17th St SE		Transaction ID: C2623
City Cedar Rapids	State IA	Zip Code 52403-2609
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer City of Cedar Rapids	Occupation Mayor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3502.00	

SUBTOTAL of Receipts This Page (optional)

1030.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Kathleen Brigid Halloran

Mailing Address 825 17th St SE

City State Zip Code
Cedar Rapids IA 52403-2609

FEC ID number of contributing
federal political committee.

C

Name of Employer
City of Cedar Rapids

Occupation
Mayor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3502.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C2896

Amount of Each Receipt this Period

417.00

B. Full Name (Last, First, Middle Initial)
Diane Linda Hamilton

Mailing Address 172 Casino Rd
PO Box 188

City State Zip Code
Storm Lake IA 50588-7774

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hamilton Law Firm

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 4

Transaction ID: C2717

Amount of Each Receipt this Period

1500.00

C. Full Name (Last, First, Middle Initial)
Marc Harding

Mailing Address 3211 Lincoln Place Dr

City State Zip Code
Des Moines IA 50312-3003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harding Law Office

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 0 4

Transaction ID: C2739

Amount of Each Receipt this Period

51.00

SUBTOTAL of Receipts This Page (optional)

1968.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Marc Harding
 Mailing Address 3211 Lincoln Place Dr

City State Zip Code
 Des Moines IA 50312-3003

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Harding Law Office

Occupation
 Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 8 / 2 0 0 4

Transaction ID: C2763

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
 Jd D Hartung
 Mailing Address 608 Locust St
 Ste 100

City State Zip Code
 Des Moines IA 50309-3701

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Hartung & Schroeder LLP

Occupation
 Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 0 4

Transaction ID: C2788

Amount of Each Receipt this Period

200.00

C. Full Name (Last, First, Middle Initial)
 Jd D Hartung
 Mailing Address 608 Locust St
 Ste 100

City State Zip Code
 Des Moines IA 50309-3701

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Hartung & Schroeder LLP

Occupation
 Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 0 4

Transaction ID: C2789

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Mark Hedberg		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 4
Mailing Address 840 5th Ave		Transaction ID: C2790
City Des Moines	State IA	Zip Code 50309-1307
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Hedberg Law Office	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Thomas Irving Henderson		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 4
Mailing Address 6239 N Winwood Dr		Transaction ID: C2898
City Johnston	State IA	Zip Code 50131-2035
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

C. Full Name (Last, First, Middle Initial) Thomas Irving Henderson		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 4
Mailing Address 6239 N Winwood Dr		Transaction ID: C3123
City Johnston	State IA	Zip Code 50131-2035
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

SUBTOTAL of Receipts This Page (optional)

430.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Gerald David Hurd

Mailing Address 300 Walnut St
Unit 183

City State Zip Code
Des Moines IA 50309-2244

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4080.67

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 0 4

Transaction ID: C2742

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)

Gerald David Hurd

Mailing Address 300 Walnut St
Unit 183

City State Zip Code
Des Moines IA 50309-2244

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4080.67

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C2900

Amount of Each Receipt this Period

417.00

C. Full Name (Last, First, Middle Initial)

Ann Hutchinson

Mailing Address 3035 Quail Ridge Rd

City State Zip Code
Bettendorf IA 52722-5334

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eastern Iowa Community Co-
llege

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C2901

Amount of Each Receipt this Period

104.00

SUBTOTAL of Receipts This Page (optional)

1521.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Anna M Hyatt-Crozier

Mailing Address 1614 E 8th St

City State Zip Code
Des Moines IA 50316-2234

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
Research Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 4

Transaction ID: C2969

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Paul Wesley Johnson

Mailing Address 2689 Lannon Hill Rd

City State Zip Code
Decorah IA 52101-7610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 0 4

Transaction ID: C2822

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Jacqueline Lorraine Juhl

Mailing Address 800 1st Ave SW

City State Zip Code
Waverly IA 50677-2904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 4

Transaction ID: C2575

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)

445.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Jacqueline Lorraine Juhl

Mailing Address 800 1st Ave SW

City

Waverly

State

IA

Zip Code

50677-2904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 4

Transaction ID: C2576

Amount of Each Receipt this Period

120.00

B. Full Name (Last, First, Middle Initial)

Patricia Lou Kelley

Mailing Address 376 Koser Ave

City

Iowa City

State

IA

Zip Code

52246-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 4

Transaction ID: C2839

Amount of Each Receipt this Period

80.00

C. Full Name (Last, First, Middle Initial)

John Patrick Kibbie

Mailing Address PO Box 190

City

Emmetsburg

State

IA

Zip Code

50536-0190

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C3073

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Angelyn M King

Mailing Address 1361 72nd St

City

Windsor Heights

State

IA

Zip Code

50311-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa State Education Asso-
ciation

Occupation

Political Action Coord.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 4

Transaction ID: C3131

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Max Ross Knauer, III

Mailing Address 4503 Wakonda Pkwy

City

Des Moines

State

IA

Zip Code

50315-3362

FEC ID number of contributing
federal political committee.

C

Name of Employer
Des Moines Ind Comm School
Dist

Occupation

Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 4

Transaction ID: C3132

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Carol A Kramer

Mailing Address 1304 S 4th Ave W

City

Newton

State

IA

Zip Code

50208-3509

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 4

Transaction ID: C2796

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

460.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Carol A Kramer

Mailing Address 1304 S 4th Ave W

City State Zip Code
Newton IA 50208-3509

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 4

Transaction ID: C2841

Amount of Each Receipt this Period

25.00

B. Full Name (Last, First, Middle Initial)

Keith Alvin Kreiman

Mailing Address 406 Parkview Dr

City State Zip Code
Bloomfield IA 52537-1737

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 4

Transaction ID: C2719

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

David Kruidenier, JR

Mailing Address 3409 Southern Hills Dr

City State Zip Code
Des Moines IA 50321-1318

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 4

Transaction ID: C2627

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2625.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Linda R Langston
Mailing Address 4257 Sunland Ct SE

City State Zip Code
Cedar Rapids IA 52403-2119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Elected Official

Occupation
Linn County

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 7 / 2 0 0 4

Transaction ID: C3020

Amount of Each Receipt this Period

150.00

B. Full Name (Last, First, Middle Initial)
Linda R Langston
Mailing Address 4257 Sunland Ct SE

City State Zip Code
Cedar Rapids IA 52403-2119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Elected Official

Occupation
Linn County

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 4

Transaction ID: C2866

Amount of Each Receipt this Period

40.00

C. Full Name (Last, First, Middle Initial)
Linda R Langston
Mailing Address 4257 Sunland Ct SE

City State Zip Code
Cedar Rapids IA 52403-2119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Elected Official

Occupation
Linn County

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 4

Transaction ID: C2865

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Linda R Langston
Mailing Address 4257 Sunland Ct SE

City State Zip Code
Cedar Rapids IA 52403-2119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Elected Official

Occupation
Linn County

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C3074

Amount of Each Receipt this Period

30.00

B. Full Name (Last, First, Middle Initial)
James C Larew
Mailing Address 504 E Bloomington St

City State Zip Code
Iowa City IA 52245-2803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Larew Law Firm

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 4

Transaction ID: C2867

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Paulee Lipsman
Mailing Address 2880 Grand Ave
Apt 106

City State Zip Code
Des Moines IA 50312-4273

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
Legislative Staff Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 0 4

Transaction ID: C2653

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

630.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Paulee Lipsman		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 0 4	
Mailing Address 2880 Grand Ave Apt 106		Transaction ID: C2747	
City Des Moines	State IA	Zip Code 50312-4273	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer State of Iowa	Occupation Legislative Staff Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		
B. Full Name (Last, First, Middle Initial) Christine Greene Louscher		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 4	
Mailing Address 308 Robinson Dr		Transaction ID: C2628	
City Algona	State IA	Zip Code 50511-7191	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00	
Name of Employer Self	Occupation Counselor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		
C. Full Name (Last, First, Middle Initial) Mrs Gertrude Macqueen		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 4	
Mailing Address 454 Lexington Ave		Transaction ID: C2910	
City Iowa City	State IA	Zip Code 52246-2417	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
SUBTOTAL of Receipts This Page (optional)		1700.00	
TOTAL This Period (last page this line number only)			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Mary Patricia Maloney
Mailing Address 3415 Witmer Pkwy

City State Zip Code
Des Moines IA 50310-4434

FEC ID number of contributing
federal political committee.

C

Name of Employer
Polk County IA

Occupation
Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 4

Transaction ID: C3049

Amount of Each Receipt this Period

30.00

B. Full Name (Last, First, Middle Initial)
Mary Patricia Maloney
Mailing Address 3415 Witmer Pkwy

City State Zip Code
Des Moines IA 50310-4434

FEC ID number of contributing
federal political committee.

C

Name of Employer
Polk County IA

Occupation
Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 4

Transaction ID: C2869

Amount of Each Receipt this Period

35.00

C. Full Name (Last, First, Middle Initial)
Mary Patricia Maloney
Mailing Address 3415 Witmer Pkwy

City State Zip Code
Des Moines IA 50310-4434

FEC ID number of contributing
federal political committee.

C

Name of Employer
Polk County IA

Occupation
Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C2911

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Charles T Manatt

Mailing Address 1501 M St NW
Ste 700

City State Zip Code
Washington DC 20005-1737

FEC ID number of contributing
federal political committee.

C

Name of Employer
Manatt Phelps

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 2 / 2 0 0 4

Transaction ID: C2560

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Marvin E Mazie

Mailing Address 7 SW 56th St

City State Zip Code
Des Moines IA 50312-2155

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 0 4

Transaction ID: C2707

Amount of Each Receipt this Period

750.00

C. Full Name (Last, First, Middle Initial)
Dwayne McAninch

Mailing Address PO Box 1486

City State Zip Code
Des Moines IA 50306-1486

FEC ID number of contributing
federal political committee.

C

Name of Employer
McAninch Corporation

Occupation
President

Receipt For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 4

Transaction ID: C62733

Amount of Each Receipt this Period

-5000.00

[MEMO ITEM]

* See schedule B, Line 29.

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 210

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Dwayne McAninch

Mailing Address PO Box 1486

City	State	Zip Code
Des Moines	IA	50306-1486

FEC ID number of contributing
federal political committee.

C

Name of Employer
McAninch CorporationOccupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	0	4

Transaction ID: C62770

Amount of Each Receipt this Period

15000.00

B. Full Name (Last, First, Middle Initial)

Glennis McAninch

Mailing Address PO Box 1486

City	State	Zip Code
Des Moines	IA	50306-1486

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	0	4

Transaction ID: C2631

Amount of Each Receipt this Period

10000.00

C. Full Name (Last, First, Middle Initial)

Douglas John McReynolds

Mailing Address PO Box 605

City	State	Zip Code
Fayette	IA	52142-0605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Upper Iowa UniversityOccupation
English Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	0	4

Transaction ID: C2497

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

25240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Helen Naomi Miller
Mailing Address 1936 15th Ave N

City State Zip Code
Fort Dodge IA 50501-7701

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 0 4

Transaction ID: C2748

Amount of Each Receipt this Period

51.00

B. Full Name (Last, First, Middle Initial)
Helen Naomi Miller
Mailing Address 1936 15th Ave N

City State Zip Code
Fort Dodge IA 50501-7701

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 4

Transaction ID: C2799

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Craig H Neilsen
Mailing Address 8620 Titleist Cir

City State Zip Code
Las Vegas NV 89117-5843

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ameristar

Occupation
Preident

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 0 4

Transaction ID: C2751

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1051.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Gustav C Nelson
Mailing Address 1141 Cummins Cir

City State Zip Code
Des Moines IA 50311-2113

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 4

Transaction ID: C2600

Amount of Each Receipt this Period

400.00

B. Full Name (Last, First, Middle Initial)
Doris Jean Newlin
Mailing Address 3315 48th Pl

City State Zip Code
Des Moines IA 50310-2608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 4

Transaction ID: C2999

Amount of Each Receipt this Period

7000.00

C. Full Name (Last, First, Middle Initial)
Brice C Oakley
Mailing Address 418 38th Pl

City State Zip Code
Des Moines IA 50312-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 4

Transaction ID: C2973

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

7650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Mary Rose Ortmann
Mailing Address 1305 NE Lake View Ct

City State Zip Code
Ankeny IA 50021-4538

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allied Insurance

Occupation
Systems Development Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 0 4

Transaction ID: C2824

Amount of Each Receipt this Period

240.00

B. Full Name (Last, First, Middle Initial)
Robert J Osterhaus
Mailing Address 216 Austin Ave

City State Zip Code
Maquoketa IA 52060-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1340.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 4

Transaction ID: C2801

Amount of Each Receipt this Period

80.00

C. Full Name (Last, First, Middle Initial)
Robert J Osterhaus
Mailing Address 216 Austin Ave

City State Zip Code
Maquoketa IA 52060-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1340.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C3084

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Suellen Overton

Mailing Address 227 Sylvan Dr

City State Zip Code
Council Bluffs IA 51503-0272

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 4

Transaction ID: C2578

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)

David L Palmer

Mailing Address 213 SW Flynn Dr

City State Zip Code
Ankeny IA 50023-2635

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa Community Colleges

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 4

Transaction ID: C2977

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

Thomas A Palmer

Mailing Address 4090 Westown Pwy Suite E

City State Zip Code
West Des Moines IA 50266

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lawyer, Dougherty, Palmer
& Flansb

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 4

Transaction ID: C2978

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Michele Parslow

Mailing Address 1222 Broad St

City State Zip Code
Grinnell IA 50112-1628

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 4

Transaction ID: C2694

Amount of Each Receipt this Period

240.00

B. Full Name (Last, First, Middle Initial)

Thomas R Patterson

Mailing Address 6550 Center St

City State Zip Code
Des Moines IA 50312-1037

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
Research Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

701.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 4

Transaction ID: C2979

Amount of Each Receipt this Period

51.00

C. Full Name (Last, First, Middle Initial)

Linda Elizabeth Paul

Mailing Address 3810 Peterson PL

City State Zip Code
North Liberty IA 52317-9027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 4

Transaction ID: C2579

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

541.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Herman C Quirnbach
Mailing Address 1002 Jarrett Cir

City State Zip Code
Ames IA 50014-3937

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 4

Transaction ID: C2804

Amount of Each Receipt this Period

400.00

B. Full Name (Last, First, Middle Initial)
Herman C Quirnbach
Mailing Address 1002 Jarrett Cir

City State Zip Code
Ames IA 50014-3937

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 0 4

Transaction ID: C2826

Amount of Each Receipt this Period

80.00

C. Full Name (Last, First, Middle Initial)
Amanda Elsie Ragan
Mailing Address 20 Granite Ct SE

City State Zip Code
Mason City IA 50401-6968

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C2923

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)

560.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Amanda Elsie Ragan

Mailing Address 20 Granite Ct SE

City State Zip Code
Mason City IA 50401-6968

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C3086

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. Dori Rammelsberg-Dvorak

Mailing Address 2937 240th St

City State Zip Code
Clutier IA 52217-9708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Chiropractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 4

Transaction ID: C3050

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. R Lucia Riddle

Mailing Address 1099 22nd St NW
Apt 407

City State Zip Code
Washington DC 20037-1824

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principle Finance Group

Occupation
Vice President for Gov.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 0 4

Transaction ID: C2753

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

340.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Sheila Marie Riggs

Mailing Address 4545 Oak Pond Cir

City

Eagan

State

MN

Zip Code

55123-1925

FEC ID number of contributing
federal political committee.

C

Name of Employer
Delta Dental

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 4

Transaction ID: C2809

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

B. Sara Lynne Riley

Mailing Address 390 Green Valley Ter SE

City

Cedar Rapids

State

IA

Zip Code

52403-3250

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tom Riley Law Firm, PLLC

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 4

Transaction ID: C2635

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Mary Ellen Robinette

Mailing Address 1132 N Ave

City

Elliott

State

IA

Zip Code

51532-5046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Plum Creek Kennel

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C2925

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. William J Robinson

Mailing Address 1506 30th St NW

City

Washington

State

DC

Zip Code

20007-3001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 0 4

Transaction ID: C2754

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Joseph P Romano

Mailing Address 6857 Morningside Cir

City

Johnston

State

IA

Zip Code

50131-1248

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 4

Transaction ID: C3000

Amount of Each Receipt this Period

51.00

Full Name (Last, First, Middle Initial)

C. Domenic Ruscio

Mailing Address 316 Pennsylvania Ave SE
Ste 403

City

Washington

State

DC

Zip Code

20003-1172

FEC ID number of contributing
federal political committee.

C

Name of Employer
CRD Associates

Occupation
Consultant

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 4

Transaction ID: C2519

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1051.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Ruth Marie Schaben

Mailing Address 1104 Ucon Rd

City State Zip Code
Dunlap IA 51529-1562

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 7 / 2 0 0 4

Transaction ID: C2611

Amount of Each Receipt this Period

200.00

B. Full Name (Last, First, Middle Initial)

Thomas W Scoville

Mailing Address 3637 Veazey St NW

City State Zip Code
Washington DC 20008-3136

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 0 4

Transaction ID: C2657

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

Ed W Skinner

Mailing Address PO Box 367

City State Zip Code
Altoona IA 50009-0367

FEC ID number of contributing
federal political committee.

C

Name of Employer
Skinner Law Firm

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 4

Transaction ID: C2812

Amount of Each Receipt this Period

3000.00

SUBTOTAL of Receipts This Page (optional)

4200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Ed W Skinner

Mailing Address PO Box 367

City State Zip Code
 Altoona IA 50009-0367

FEC ID number of contributing
federal political committee.

C

Name of Employer
Skinner Law Firm

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 0 4

Transaction ID: C2811

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)

Ed W Skinner

Mailing Address PO Box 367

City State Zip Code
 Altoona IA 50009-0367

FEC ID number of contributing
federal political committee.

C

Name of Employer
Skinner Law Firm

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 0 4

Transaction ID: C2810

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)

Ed W Skinner

Mailing Address PO Box 367

City State Zip Code
 Altoona IA 50009-0367

FEC ID number of contributing
federal political committee.

C

Name of Employer
Skinner Law Firm

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 2 / 2 0 0 4

Transaction ID: C2827

Amount of Each Receipt this Period

3500.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Robert Bradley Skinner
Mailing Address 1810 Andrews Dr

City State Zip Code
Pleasant Hill IA 50327-0910

FEC ID number of contributing
federal political committee.

C

Name of Employer
Skinner Law Firm

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2502.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C2932

Amount of Each Receipt this Period

417.00

B. Full Name (Last, First, Middle Initial)
Tom L Slater
Mailing Address 118 Northwood Rd

City State Zip Code
Des Moines IA 50312-4432

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Public Policy Group[

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 4

Transaction ID: C2983

Amount of Each Receipt this Period

200.00

C. Full Name (Last, First, Middle Initial)
Arthur A Small
Mailing Address 20 Rocky Shore Dr

City State Zip Code
Iowa City IA 52246-3832

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 0 4

Transaction ID: C2828

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

867.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Neal E Smith

Mailing Address 300 Walnut St
 Unit 90

City State Zip Code
 Des Moines IA 50309-2241

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 4 / 2 0 0 4

Transaction ID: C2876

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
 Nancy Lee Steward

Mailing Address 1070 37th St

City State Zip Code
 Des Moines IA 50311-3639

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Self

Occupation
 Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 1 / 2 0 0 4

Transaction ID: C2673

Amount of Each Receipt this Period

200.00

C. Full Name (Last, First, Middle Initial)
 Nancy Lee Steward

Mailing Address 1070 37th St

City State Zip Code
 Des Moines IA 50311-3639

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Self

Occupation
 Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 5 / 2 0 0 4

Transaction ID: C2711

Amount of Each Receipt this Period

102.00

SUBTOTAL of Receipts This Page (optional)

1302.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Nancy Lee Steward

Mailing Address 1070 37th St

City

Des Moines

State

IA

Zip Code

50311-3639

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Homemaker

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C3093

Amount of Each Receipt this Period

30.00

B. Full Name (Last, First, Middle Initial)

John R Stratton

Mailing Address 815 Wylde Green Rd

City

Iowa City

State

IA

Zip Code

52246-4826

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 4

Transaction ID: C2531

Amount of Each Receipt this Period

25.00

C. Full Name (Last, First, Middle Initial)

Al Sturgeon

Mailing Address 507 7th St

City

Sioux City

State

IA

Zip Code

51101-1100

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Attorney

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

451.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 4

Transaction ID: C2723

Amount of Each Receipt this Period

51.00

SUBTOTAL of Receipts This Page (optional)

106.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Kevin Sullivan

Mailing Address 6003 Welborn Dr

City State Zip Code
Bethesda MD 20816-1159

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Educational Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 4

Transaction ID: C2533

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)

Laura Jane Teaford

Mailing Address 3913 Carlton Dr

City State Zip Code
Cedar Falls IA 50613-5767

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 4

Transaction ID: C2594

Amount of Each Receipt this Period

240.00

C. Full Name (Last, First, Middle Initial)

Irene S Tobin

Mailing Address 2056 Forest Ave

City State Zip Code
New Market IA 51646-4084

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 4

Transaction ID: C2816

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

810.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Margaret M Weiss

Mailing Address 4819 Waterbury Rd

City State Zip Code
Des Moines IA 50312-1965

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa Historical Foundation

Occupation
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 4

Transaction ID: C2880

Amount of Each Receipt this Period

200.00

B. Full Name (Last, First, Middle Initial)

Margaret M Weiss

Mailing Address 4819 Waterbury Rd

City State Zip Code
Des Moines IA 50312-1965

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa Historical Foundation

Occupation
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 4

Transaction ID: C3051

Amount of Each Receipt this Period

30.00

C. Full Name (Last, First, Middle Initial)

Marvin F Weissberg

Mailing Address 1401 N Oak St

City State Zip Code
Arlington VA 22209-3699

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 4

Transaction ID: C2539

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

730.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Roger F Wendt
 Mailing Address 2313 Seneca Way

City State Zip Code
 Sioux City IA 51104-1502

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 7 / 2 0 0 4

Transaction ID: C2755

Amount of Each Receipt this Period

102.00

B. Full Name (Last, First, Middle Initial)
 Lu Ann White
 Mailing Address 6730 Ceres Cir

City State Zip Code
 Johnston IA 50131-1656

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hanson, Bjork & Russell
LLP

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 2 / 2 0 0 4

Transaction ID: C2830

Amount of Each Receipt this Period

200.00

C. Full Name (Last, First, Middle Initial)
 Lu Ann White
 Mailing Address 6730 Ceres Cir

City State Zip Code
 Johnston IA 50131-1656

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hanson, Bjork & Russell
LLP

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 4

Transaction ID: C3096

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

332.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Tom Whitney

Mailing Address 1800 Ruan Ctr

City

Des Moines

State

IA

Zip Code

50309-2529

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 0 4

Transaction ID: C2767

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Margaret M Whitworth

Mailing Address 2402 D Ave NE

City

Cedar Rapids

State

IA

Zip Code

52402-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brucemore, Inc

Occupation
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 4

Transaction ID: C2541

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Connie P Wimer

Mailing Address 100 4th St

City

Des Moines

State

IA

Zip Code

50309-4742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Business Publications

Occupation
Publisher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C2937

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 210

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Cindy L Winckler

Mailing Address 6 Thode Ct

City State Zip Code
Davenport IA 52802-1650

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 4

Transaction ID: C2845

Amount of Each Receipt this Period

70.00

B. Full Name (Last, First, Middle Initial)

Cindy L Winckler

Mailing Address 6 Thode Ct

City State Zip Code
Davenport IA 52802-1650

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 4

Transaction ID: C3171

Amount of Each Receipt this Period

60.00

C. Full Name (Last, First, Middle Initial)

Cindy L Winckler

Mailing Address 6 Thode Ct

City State Zip Code
Davenport IA 52802-1650

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 4

Transaction ID: C2987

Amount of Each Receipt this Period

51.00

SUBTOTAL of Receipts This Page (optional)

181.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 210

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Bruce S Wolff

Mailing Address 5065 Macomb St NW

City State Zip Code
Washington DC 20016-2674

FEC ID number of contributing
federal political committee.

C

Name of Employer
Manatt, Phelps and PhillipsOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	0	4

Transaction ID: C2543

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Brent Calvin Wynja

Mailing Address 1012 Hunziker Dr

City State Zip Code
Ames IA 50010-5028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Salomon, Smith, BarneyOccupation
VP-Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	4

Transaction ID: C2846

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

100827.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 210

(check only one)

<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Clarke County Democratic Central Committee

Mailing Address PO Box 112

City	State	Zip Code
Indianola	IA	50125-0112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	4

Transaction ID: C3027

Amount of Each Receipt this Period

330.00

B. Full Name (Last, First, Middle Initial)

Harrison County Democrats

Mailing Address 2741 Niagara Trl

City	State	Zip Code
Logan	IA	51546-6014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	0	4

Transaction ID: C3037

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

570.00

TOTAL This Period (last page this line number only)

570.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 210

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
2ND DISTRICT CONGRESSIONAL DEMOCRATIC COMMITTEE-IOWA*

Mailing Address 801 SHERIDAN ROAD

City State Zip Code
 WATERLOO IA 50701

FEC ID number of contributing
federal political committee. **C** C00021824

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 4 / 2 0 0 4

Transaction ID: C66188

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)
Adams-2004 Rural Voice Campaign

Mailing Address 904 E Reed St

City State Zip Code
 Red Oak IA 51566-2412

FEC ID number of contributing
federal political committee. **C**

Name of Employer Occupation

Receipt For:

2004
☐ Primary ☐ General
☒ Other (specify) ▼
 N

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 4

Transaction ID: C62400

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
American Nurses Association PAC

Mailing Address 600 Maryland Ave SW
 Ste 100

City State Zip Code
 Washington DC 20024-2520

FEC ID number of contributing
federal political committee. **C** C00017525

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 7 / 2 0 0 4

Transaction ID: C3003

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 210

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Citizens for Cammie Pohl Mailing Address 1216 N Concord St City Davenport State IA Zip Code 52804 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 4 Transaction ID: C66187 Amount of Each Receipt this Period 600.00
B. Full Name (Last, First, Middle Initial) Citizens for Connolly Mailing Address 3458 Daniels St City Dubuque State IA Zip Code 52002-5121 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 4 Transaction ID: C3033 Amount of Each Receipt this Period 2500.00
C. Full Name (Last, First, Middle Initial) Committee to Elect Joe Seng Mailing Address 4804 Northwest Blvd City Davenport State IA Zip Code 52806 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 4 Transaction ID: C3052 Amount of Each Receipt this Period 2500.00

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 210

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Committee to Elect Nathan Reichert

Mailing Address 1155 Iowa Ave.

City State Zip Code
 Muscatine IA 52761

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 4 / 2 0 0 4

Transaction ID: C3053

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
CWA Local 7102 PAC

Mailing Address 3612 SW 9th St

City State Zip Code
 Des Moines IA 50315-3044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-1760.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 0 4

Transaction ID: C3004

Amount of Each Receipt this Period

240.00

C. Full Name (Last, First, Middle Initial)
Danielson for Senate

Mailing Address 3906 Monterey Drive

City State Zip Code
 Waterloo IA 50701-3527

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 8 / 2 0 0 4

Transaction ID: C3026

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

990.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 210

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Dave Franker for Congress

Mailing Address PO Box 587

City

North Liberty

State

IA

Zip Code

52317-0587

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 4

Transaction ID: C3163

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. DAWN'S LIST

Mailing Address 937 37th Street

City

Des Moines

State

IA

Zip Code

50310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

912.24

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 4

Transaction ID: C3164

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. E Joyce Schulte for Congress

Mailing Address PO Box 367

City

Exira

State

IA

Zip Code

50076-0367

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 4

Transaction ID: C3111

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 210

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Friends of Bill Gluba Mailing Address PO Box 2205 City State Zip Code Davenport IA 52809 FEC ID number of contributing federal political committee. C C00391151 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10125.00	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 4 Transaction ID: C3001 Amount of Each Receipt this Period 10000.00 Transfer
B. Full Name (Last, First, Middle Initial) Hancock for Senate Mailing Address 310 E. Main St. City State Zip Code Epworth IA 52045 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 4 Transaction ID: C3015 Amount of Each Receipt this Period 2000.00
C. Full Name (Last, First, Middle Initial) INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS COMMITTEE ON POLITICAL EDUCATION Mailing Address 900 Seventh St. N.W. City State Zip Code Washington DC 20001 FEC ID number of contributing federal political committee. C C00027342 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 4 Transaction ID: C3005 Amount of Each Receipt this Period 10000.00

SUBTOTAL of Receipts This Page (optional)

22000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 210

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

lowans for Shearer

Mailing Address 1029 S Iowa Ave

City State Zip Code
Washington IA 52353-1126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 4

Transaction ID: C3018

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Kressig for Iowa House District 19

Mailing Address 3523 Veralta Dr

City State Zip Code
Cedar Falls IA 50613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 4

Transaction ID: C3041

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

McCarthy for State Representative

Mailing Address 5220 SE 31st Court

City State Zip Code
Des Moines IA 50320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2004

☐ Primary ☐ General
☒ Other (specify) ▼
N

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 0 4

Transaction ID: C62401

Amount of Each Receipt this Period

8000.00

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 210

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Mertz for Representative

Mailing Address 607 110th Street

City State Zip Code
Ottosen IA 50570-8504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2004

☐ Primary ☐ General
☒ Other (specify) ▼
N

Aggregate Year-to-Date ▼

-949.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 0 4

Transaction ID: C62402

Amount of Each Receipt this Period

51.00

B. Full Name (Last, First, Middle Initial)

Odekirk for Iowa House

Mailing Address 921 Lynda Rd

City State Zip Code
Waterloo IA 50701-5223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 5 / 2 0 0 4

Transaction ID: C3019

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

PAUL JOHNSON FOR CONGRESS

Mailing Address PO Box 475

City State Zip Code
Decorah IA 52101-0475

FEC ID number of contributing
federal political committee.

C C00399774

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 4

Transaction ID: C3006

Amount of Each Receipt this Period

5000.00

Transfer

SUBTOTAL of Receipts This Page (optional)

5301.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 210

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Runkel for Representative

Mailing Address 3970 Vail Ave

City	State	Zip Code
Story City	IA	50248-7558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	0	4

Transaction ID: C3017

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Sawtelle for Senate

Mailing Address 308 South 6th Street

City	State	Zip Code
Marshalltown	IA	50158-2658

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2198.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	0	4

Transaction ID: C3025

Amount of Each Receipt this Period

2000.00

C. Full Name (Last, First, Middle Initial)
SEIU COPE

Mailing Address 1313 L St NW

City	State	Zip Code
Washington	DC	20005-4101

FEC ID number of contributing
federal political committee.

C C00004036

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	0	4

Transaction ID: C3002

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

7250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 210

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Sidney Baker for State Representative

Mailing Address 710 Birch Ln

City

Clarion

State

IA

Zip Code

50525-1233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 4

Transaction ID: C3174

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. United Food and Commercial Workers Intern

Mailing Address 1775 K St NW

City

Washington

State

DC

Zip Code

20006-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 4

Transaction ID: C3170

Amount of Each Receipt this Period

210.00

Convention delegate fee

Full Name (Last, First, Middle Initial)

C. Waterman for State Senate

Mailing Address PO Box 273

City

Osceola

State

IA

Zip Code

50213-0273

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 4

Transaction ID: C3054

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

810.00

TOTAL This Period (last page this line number only)

56851.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 210

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Dollars for Democrats

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C C00073791

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

115000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 4

Transaction ID: C3007

Amount of Each Receipt this Period

15000.00

Full Name (Last, First, Middle Initial)

B. Friends of Bill Gluba

Mailing Address PO Box 2205

City

Davenport

State

IA

Zip Code

52809

FEC ID number of contributing
federal political committee.

C C00391151

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10125.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 4

Transaction ID: C3024

Amount of Each Receipt this Period

125.00

Convention exhibit space

Full Name (Last, First, Middle Initial)

C. Dollars for Democrats

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C C00073791

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

115000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 4

Transaction ID: C3008

Amount of Each Receipt this Period

25000.00

Transfer from affiliate

SUBTOTAL of Receipts This Page (optional)

40125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 210

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
MR KELLY BEHRENS

Mailing Address **112 MAIN ST # 246**

City State Zip Code
ALBERT CITY IA 50510

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 21 / 2006

Transaction ID: C80254

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

* ASDC Dollars for Democr-
ats

B. Full Name (Last, First, Middle Initial)
EDWARD & BONNIE CAMPBELL

Mailing Address **3131 FLEUR DR**

City State Zip Code
DES MOINES IA 50321

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CONSULTANT/ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 18 / 2004

Transaction ID: C80255

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

* ASDC Dollars for Democr-
ats

C. Full Name (Last, First, Middle Initial)
Thomas G Carsner

Mailing Address **1627 College Court PI**

City State Zip Code
Iowa City IA 52245-4417

FEC ID number of contributing
federal political committee.

C

Name of Employer
American College Testing

Occupation

Editor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

06 / 21 / 2004

Transaction ID: C80256

Amount of Each Receipt this Period

400.00

[MEMO ITEM]

* ASDC Dollars for Democr-
ats

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 210

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Bridget A Chambers

Mailing Address 2522 Tunnel Mill Rd

City

Webster City

State

IA

Zip Code

50595-7387

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa Attorney General's
Office

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 4

Transaction ID: C80257

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

* ASDC Dollars for Democr-
ats

Full Name (Last, First, Middle Initial)

B. DONNA & WALTER FELKER

Mailing Address 2701 NE DELAWARE AVE

City

ANKENY

State

IA

Zip Code

50021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 0 4

Transaction ID: C80258

Amount of Each Receipt this Period

750.00

[MEMO ITEM]

* ASDC Dollars for Democr-
ats

Full Name (Last, First, Middle Initial)

C. EDWARD FRIEDMANN JR

Mailing Address 3274 DELTA CIR

City

REDFIELD

State

IA

Zip Code

50233

FEC ID number of contributing
federal political committee.

C

Name of Employer
REDFEILD CLINIC

Occupation
PHYSICIAN ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 0 4

Transaction ID: C80259

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

* ASDC Dollars for Democr-
ats

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 210

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
HELEN GREEN

Mailing Address **PO BOX 43**

City State Zip Code
GRAND MOUND IA 52751

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 07 / 2004

Transaction ID: C80260

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

* ASDC Dollars for Democr-
ats

B. Full Name (Last, First, Middle Initial)
BASIL LISTER

Mailing Address **3266 HIGHLAND AVE**

City State Zip Code
BEDFORD IA 50833

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 11 / 2004

Transaction ID: C80261

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

* ASDC Dollars for Democr-
ats

C. Full Name (Last, First, Middle Initial)
MR JEFFREY NALL

Mailing Address **3433 HIGH MEADOWS DR**

City State Zip Code
CUMMING IA 50061

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF IOWA

Occupation
ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 11 / 2004

Transaction ID: C80262

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

* ASDC Dollars for Democr-
ats

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 210

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A.

Full Name (Last, First, Middle Initial)

DEAN SWINTON

Mailing Address 1940 AUDUBON DR

City

WATERLOO

State

IA

Zip Code

50701

FEC ID number of contributing
federal political committee.

C

Name of Employer
MANAGER ENGINEERING SERVI-
CESOccupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 4

Transaction ID: C80265

Amount of Each Receipt this Period

300.00

[MEMO ITEM]* ASDC Dollars for Democr-
ats**B.**

Full Name (Last, First, Middle Initial)

UNITEMIZED CONTRIBUTIONS

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

41780.05

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 4

Transaction ID: C80267

Amount of Each Receipt this Period

41780.05

[MEMO ITEM]* ASDC Dollars for Democr-
ats

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

40125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 210

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A.

Full Name (Last, First, Middle Initial)

Citizens for Tucker

Mailing Address 3111 SW 24th Ct

City

Ankeny

State

IA

Zip Code

50021-5405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 4

Transaction ID: C3162

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Sawtelle for Senate

Mailing Address 308 South 6th Street

City

Marshalltown

State

IA

Zip Code

50158-2658

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2198.75

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 4

Transaction ID: C3010

Amount of Each Receipt this Period

198.75

SUBTOTAL of Receipts This Page (optional)

248.75

TOTAL This Period (last page this line number only)

248.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 210

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
CWA Local 7102 PAC

Mailing Address 3612 SW 9th St

City State Zip Code
Des Moines IA 50315-3044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-1760.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 4

Transaction ID: C79987

Amount of Each Receipt this Period

-2000.00

B. Full Name (Last, First, Middle Initial)
Mertz for Representative

Mailing Address 607 110th Street

City State Zip Code
Ottosen IA 50570-8504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-949.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 4

Transaction ID: C79986

Amount of Each Receipt this Period

-1000.00

SUBTOTAL of Receipts This Page (optional)

-3000.00

TOTAL This Period (last page this line number only)

-3000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 210

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) National Motor Club		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 4	
Mailing Address 6500 Beltline Rd - Suite 200		Transaction ID: C3030	
City Irving	State TX	Zip Code 75063	Amount of Each Receipt this Period 488.22
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3184.48	
B. Full Name (Last, First, Middle Initial) Story County Democratic Central Committee		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 4	
Mailing Address 2800 Pinehurst Cir		Transaction ID: C62399	
City Ames	State IA	Zip Code 50010-4562	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1090.00	

SUBTOTAL of Receipts This Page (optional)

1488.22

TOTAL This Period (last page this line number only)

1488.22

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 86 / 210

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Deluxe Business Forms

Mailing Address PO Box 742572

City Cincinnati State OH Zip Code 45274-2572

Purpose of Disbursement
Print bank checks

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1507

Date of Disbursement

06 / 15 / 2004

Amount of Each Disbursement this Period

16.50

B. Discover Network

Mailing Address PO Box 52145

City Phoenix State AZ Zip Code 85072-2145

Purpose of Disbursement
Credit card fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1473

Date of Disbursement

06 / 02 / 2004

Amount of Each Disbursement this Period

3.68

C. Internal Revenue Service

Mailing Address SERVICE Center

City Ogden State UT Zip Code 84201-0039

Purpose of Disbursement
940 deposit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1537

Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

26.78

SUBTOTAL of Disbursements This Page (optional)

46.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 87 / 210

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address SERVICE Center

City Ogden State UT Zip Code 84201-0039

Purpose of Disbursement
941 deposit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1539

Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

1887.46

B. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Transfer for cash flow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1541

Date of Disbursement

06 / 15 / 2004

Amount of Each Disbursement this Period

26.79

C. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Transfer for cash flow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1545

Date of Disbursement

06 / 15 / 2004

Amount of Each Disbursement this Period

112.00

SUBTOTAL of Disbursements This Page (optional)

2026.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 88 / 210

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Transfer for cash flow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1543

Date of Disbursement

06 / 15 / 2004

Amount of Each Disbursement this Period

675.80

Full Name (Last, First, Middle Initial)

B. Polk County Convention Complex

Mailing Address 501 Grand Ave

City Des Moines State IA Zip Code 50309-2406

Purpose of Disbursement
Room Rental/Food and Beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1533

Date of Disbursement

06 / 24 / 2004

Amount of Each Disbursement this Period

6100.86

Full Name (Last, First, Middle Initial)

C. Polk County Convention Complex

Mailing Address 501 Grand Ave

City Des Moines State IA Zip Code 50309-2406

Purpose of Disbursement
Food and Beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1516

Date of Disbursement

06 / 24 / 2004

Amount of Each Disbursement this Period

2491.27

SUBTOTAL of Disbursements This Page (optional)

9267.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 89 / 210

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Polk County Convention Complex

Mailing Address 501 Grand Ave

City State Zip Code
Des Moines IA 50309-2406

Purpose of Disbursement
Food and Beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1534

Date of Disbursement

M M / D D / Y Y Y Y
06 24 2004

Amount of Each Disbursement this Period

467.47

B. Full Name (Last, First, Middle Initial)
Strategic Services

Mailing Address 499 S Capitol St SW

City State Zip Code
Washington DC 20003-4047

Purpose of Disbursement
Field Research

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1471

Date of Disbursement

M M / D D / Y Y Y Y
06 01 2004

Amount of Each Disbursement this Period

6500.00

C. Full Name (Last, First, Middle Initial)
The Des Moines Embassy Club

Mailing Address 801 Grand Ave
Ste 4000

City State Zip Code
Des Moines IA 50309-8000

Purpose of Disbursement
Food and Beverage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1489

Date of Disbursement

M M / D D / Y Y Y Y
06 10 2004

Amount of Each Disbursement this Period

334.84

SUBTOTAL of Disbursements This Page (optional)

7302.31

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 90 / 210

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. West Bank

Mailing Address PO Box 65020

City State Zip Code
West Des Moines IA 50265-0020

Purpose of Disbursement

Bank charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1472

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15.90

Full Name (Last, First, Middle Initial)

B. West Bank

Mailing Address PO Box 65020

City State Zip Code
West Des Moines IA 50265-0020

Purpose of Disbursement

Bank charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1477

Date of Disbursement

/ /

Amount of Each Disbursement this Period

24.24

Full Name (Last, First, Middle Initial)

C. West Bank

Mailing Address PO Box 65020

City State Zip Code
West Des Moines IA 50265-0020

Purpose of Disbursement

Bank charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1532

Date of Disbursement

/ /

Amount of Each Disbursement this Period

18.93

SUBTOTAL of Disbursements This Page (optional)

59.07

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 91 / 210

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)
A. West Bank

Mailing Address PO Box 65020

City State Zip Code
West Des Moines IA 50265-0020

Purpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1531

Date of Disbursement

/ /

Amount of Each Disbursement this Period

141.11

Full Name (Last, First, Middle Initial)
B. West Bank

Mailing Address PO Box 65020

City State Zip Code
West Des Moines IA 50265-0020

Purpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1530

Date of Disbursement

/ /

Amount of Each Disbursement this Period

13.04

SUBTOTAL of Disbursements This Page (optional)

154.15

TOTAL This Period (last page this line number only)

18856.67

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 92 / 210

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City
Des Moines

State
IA

Zip Code
50321-2841

Purpose of Disbursement
Transfer of misdeposited funds

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

N

Transaction ID: D16675

Date of Disbursement

/ /

Amount of Each Disbursement this Period

8051.00

Transfer of misdeposited
funds

SUBTOTAL of Disbursements This Page (optional)

8051.00

TOTAL This Period (last page this line number only)

8051.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 93 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Robert E Josten

Mailing Address 801 Grand Ave
Ste 3900

City State Zip Code
Des Moines IA 50309-8009

Purpose of Disbursement
Refund 12/30/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1553

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00

	21b		22		23		24		25		26
	27		28a		28b	X	28c		29		30b

NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

2000.00

600.00

2000.00

FEC Schedule B (Form 3X) Rev. 02/2003

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 95 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Brian Quirk for State Representative

Mailing Address 1011 Sunset

City New Hampton State IA Zip Code 50659

Purpose of Disbursement
Refund 10/28/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1557

Date of Disbursement

06 / 04 / 2004

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

B. Committee to Elect Jack Holveck

Mailing Address 2007 47th St

City Des Moines State IA Zip Code 50310-3044

Purpose of Disbursement
Refund 10/10/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1558

Date of Disbursement

06 / 04 / 2004

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Committee to Elect Matt McCoy

Mailing Address 4720 Woodland Ave.

City Des Moines State IA Zip Code 50312

Purpose of Disbursement
Refund 8/28/03 contribution

Candidate Name
Martin Zylstra

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1560

Date of Disbursement

06 / 04 / 2004

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 96 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. CWA Council of State of Iowa COPE Fund

Mailing Address 369 California St

City Waterloo State IA Zip Code 50703-5329

Purpose of Disbursement
Refund 11/10/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1561

Date of Disbursement

06 / 04 / 2004

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Fraire for Senate

Mailing Address Rt. 1

City Ft. Madison State IA Zip Code 52627

Purpose of Disbursement
Refund 10/14/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1563

Date of Disbursement

06 / 04 / 2004

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Heavy Highway PAC

Mailing Address 4880 Hubbell Ave

City Des Moines State IA Zip Code 50317

Purpose of Disbursement
Refund 11/18/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1564

Date of Disbursement

06 / 04 / 2004

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

3800.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 97 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☒ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Huser for State Representative

Mailing Address 213 7th St NW

City State Zip Code
Altoona IA 50009-1477

Purpose of Disbursement
Refund 10/28/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1565

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
Iowa Friends of Rural (Iowa F.O.R.E.) Electrification PAC

Mailing Address 8525 Douglas Ave
Ste 48

City State Zip Code
Des Moines IA 50322-2925

Purpose of Disbursement
Refund 11/10/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1566

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Iowa Laborers Political Action Committee Fund

Mailing Address 5806 Meredith Dr
Ste B

City State Zip Code
Urbandale IA 50322-1203

Purpose of Disbursement
Refund 11/15/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1567

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 98 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Iowa State Council of Machinists		Transaction ID: D1568 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		0	4		2	0	0	4													
Mailing Address 2000 Walker St		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																						
City Des Moines State IA Zip Code 50317-5201																						
Purpose of Disbursement Refund 10/28/03 contribution																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Ironworkers Local 21 Legislative		Transaction ID: D1569 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		0	4		2	0	0	4													
Mailing Address 14515 Industrial Rd		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																						
City Omaha State NE Zip Code 68144-3290																						
Purpose of Disbursement Refund 10/15/03 contribution																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
C. Full Name (Last, First, Middle Initial) Jacoby for House Committee		Transaction ID: D1570 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		0	4		2	0	0	4													
Mailing Address 2308 N Ridge Dr		Amount of Each Disbursement this Period <table border="1"> <tr> <td>300.00</td> </tr> </table>	300.00																			
300.00																						
City Coralville State IA Zip Code 52241-1389																						
Purpose of Disbursement Refund 11/13/03 contribution																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 99 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Kuhn for Senate

Mailing Address 2667 240th St

City Charles City State IA Zip Code 50616-8958

Purpose of Disbursement
Refund 10/21/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1559

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

B. Full Name (Last, First, Middle Initial)
MCI Iowa PAC

Mailing Address 707 17th St
Ste 3600

City Denver State CO Zip Code 80202-3404

Purpose of Disbursement
Refund 10/27/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1571

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

C. Full Name (Last, First, Middle Initial)
Paul Bell for State Representative

Mailing Address 611 E 17th St N

City Newton State IA Zip Code 50208-2430

Purpose of Disbursement
Refund 10/31/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1574

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 100 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. PLUMBERS AND PIPEFITTERS LOCAL UNION #25 FEDERAL P

Mailing Address 4600 46th Ave

City Rock Island State IL Zip Code 61201-7143

Purpose of Disbursement
Refund 10/27/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1575

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

B. Tracy Davis

Mailing Address Political Action Fund

City Des Moines State IA Zip Code 50317

Purpose of Disbursement
Refund 11/15/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1573

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. UFCW Region Council No. 6 Northern Plains

Mailing Address 1699 E Woodfield Road

City Schaumburg State IL Zip Code 60173

Purpose of Disbursement
Refund 10/27/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1576

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

4200.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 101 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☒ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. United Steel Workers of America

Mailing Address 125 NW Broadway Ave

City State Zip Code
Des Moines IA 50313-2333

Purpose of Disbursement
Refund 10/17/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1577

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Van Buren County Democratic Central Committee

Mailing Address RR 2

City State Zip Code
Keosauqua IA 52565

Purpose of Disbursement
Refund 10/27/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1578

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. VERIZON Iowa State Good Govt Club

Mailing Address 1116 Reed Street, Apt 101

City State Zip Code
Grinnell IA 50112

Purpose of Disbursement
Refund 11/11/03 contributions

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1579

Date of Disbursement

/ /

Amount of Each Disbursement this Period

600.00

SUBTOTAL of Disbursements This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 102 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Winckler for State House

Mailing Address 6 Thode Court

City Davenport State IA Zip Code 52802

Purpose of Disbursement
Refund 11/18/03 contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1580

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	0	4

Amount of Each Disbursement this Period

600.00

SUBTOTAL of Disbursements This Page (optional)

600.00

TOTAL This Period (last page this line number only)

25150.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 103 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Transfer to Levin Account

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D16938

Date of Disbursement

/

Amount of Each Disbursement this Period

5000.00

See Schedule A, Line 11a.
David McAninc

Full Name (Last, First, Middle Initial)

B. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Transfer for cash flow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1713

Date of Disbursement

/

Amount of Each Disbursement this Period

8844.90

Full Name (Last, First, Middle Initial)

C. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Transfer to Non-Federal for Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D16680

Date of Disbursement

/

Amount of Each Disbursement this Period

32374.80

SUBTOTAL of Disbursements This Page (optional)

46219.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 104 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Transfer for cash flow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1715

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1325.00

B. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Transfer for cash flow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1552

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15000.00

Transfer for cash flow purposes

C. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Transfer for cash flow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1551

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

Transfer for cash flow purposes

SUBTOTAL of Disbursements This Page (optional)

18325.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 105 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City
Des Moines

State
IA

Zip Code
50321-2841

Purpose of Disbursement
Transfer to Non-Federal for cash flow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: N

Transaction ID: D16676

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3600.00

Transfer to cash flow purposes

Full Name (Last, First, Middle Initial)

B. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City
Des Moines

State
IA

Zip Code
50321-2841

Purpose of Disbursement
Transfer to Levin Account

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: N

Transaction ID: D16672

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

8600.00

TOTAL This Period (last page this line number only)

73144.70

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 106 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Clint D Albertsen		Transaction ID: D1582 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address 1607 Little John Cir Apt 6		Amount of Each Disbursement this Period <div>793.50</div>	
City Council Bluffs	State IA		Zip Code 51503-0533
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
B. Full Name (Last, First, Middle Initial) Angelica C Anderson		Transaction ID: D1583 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 4106 Fillmore Ln		Amount of Each Disbursement this Period <div>157.23</div>	
City Davenport	State IA		Zip Code 52806-4524
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
C. Full Name (Last, First, Middle Initial) Angelica C Anderson		Transaction ID: D1584 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 4106 Fillmore Ln		Amount of Each Disbursement this Period <div>380.04</div>	
City Davenport	State IA		Zip Code 52806-4524
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)

1330.77

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 107 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Nicholaos G Antonopoulos		Transaction ID: D1586 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>
Mailing Address 118 1/2 S Dubuque St Apt 8		Amount of Each Disbursement this Period <div>793.50</div>
City Iowa City State IA Zip Code 52240-4019		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Justin K Ballard		Transaction ID: D1587 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 5216 Ida St		Amount of Each Disbursement this Period <div>182.70</div>
City Omaha State NE Zip Code 68152-2436		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Justin K Ballard		Transaction ID: D1588 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 5216 Ida St		Amount of Each Disbursement this Period <div>337.78</div>
City Omaha State NE Zip Code 68152-2436		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1313.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 108 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Andrew M Batt		Transaction ID: D1589 Date of Disbursement <div> <div>06</div> <div>15</div> <div>2004</div> </div>	
Mailing Address 604 Roosevelt Ave			
City Council Bluffs	State IA	Zip Code 51503-1829	
Purpose of Disbursement Net payroll		<div> <div>184.70</div> </div>	
Candidate Name		<div> <div>Category/Type</div> </div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Andrew M Batt		Transaction ID: D1590 Date of Disbursement <div> <div>06</div> <div>29</div> <div>2004</div> </div>	
Mailing Address 604 Roosevelt Ave			
City Council Bluffs	State IA	Zip Code 51503-1829	
Purpose of Disbursement Net payroll		<div> <div>342.40</div> </div>	
Candidate Name		<div> <div>Category/Type</div> </div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Ryan P Beatty		Transaction ID: D1591 Date of Disbursement <div> <div>06</div> <div>15</div> <div>2004</div> </div>	
Mailing Address 801 Cross Park Ave Apt 3C			
City Iowa City	State IA	Zip Code 52240-4493	
Purpose of Disbursement Net payroll		<div> <div>184.70</div> </div>	
Candidate Name		<div> <div>Category/Type</div> </div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div> <div>711.80</div> </div>	
TOTAL This Period (last page this line number only)		<div> <div></div> </div>	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 109 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Ryan P Beatty Full Name (Last, First, Middle Initial) Mailing Address 801 Cross Park Ave Apt 3C City Iowa City State IA Zip Code 52240-4493 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1592 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4 Amount of Each Disbursement this Period 443.28
B. Nathan J Biggs Full Name (Last, First, Middle Initial) Mailing Address 1211 W 18th St City Cedar Falls State IA Zip Code 50613-3501 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1593 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 4 Amount of Each Disbursement this Period 145.38
C. Nathan J Biggs Full Name (Last, First, Middle Initial) Mailing Address 1211 W 18th St City Cedar Falls State IA Zip Code 50613-3501 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1594 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4 Amount of Each Disbursement this Period 387.28
SUBTOTAL of Disbursements This Page (optional)		975.94
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 110 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Clint A Birkenholtz		Transaction ID: D1596 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>		
Mailing Address 3386 Hunter Ave		Amount of Each Disbursement this Period <div>858.23</div>		
City Newton	State IA			Zip Code 50208-8656
Purpose of Disbursement Net payroll				<div>Category/ Type</div>
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
B. Full Name (Last, First, Middle Initial) Christopher D Bonfig		Transaction ID: D1598 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>		
Mailing Address 320 E Burlington St Apt 8		Amount of Each Disbursement this Period <div>943.43</div>		
City Iowa City	State IA			Zip Code 52240-1670
Purpose of Disbursement Net payroll				<div>Category/ Type</div>
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
C. Full Name (Last, First, Middle Initial) Christopher M Bowen		Transaction ID: D1600 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>		
Mailing Address 2035 Sunnyside Ave		Amount of Each Disbursement this Period <div>913.04</div>		
City Burlington	State IA			Zip Code 52601-2532
Purpose of Disbursement Net payroll				<div>Category/ Type</div>
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ►

2714.70

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 111 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Ben J Brady		Transaction ID: D1602 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>
Mailing Address 2707 Hampton St		Amount of Each Disbursement this Period <div>974.15</div>
City Ames State IA Zip Code 50010-7132		
Purpose of Disbursement Net payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Alissa B Brammer		Transaction ID: D1603 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 4303 Harwood Dr		Amount of Each Disbursement this Period <div>212.40</div>
City Des Moines State IA Zip Code 50312-2319		
Purpose of Disbursement Net payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Alissa B Brammer		Transaction ID: D1604 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 4303 Harwood Dr		Amount of Each Disbursement this Period <div>420.20</div>
City Des Moines State IA Zip Code 50312-2319		
Purpose of Disbursement Net payroll	<div>Category/ Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1606.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 112 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Seth A Brooks		Transaction ID: D1606 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address 3828 Cass St Apt 5		Amount of Each Disbursement this Period <div>834.50</div>	
City Omaha	State NE		Zip Code 68131-1851
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
B. Full Name (Last, First, Middle Initial) Devon M Brown		Transaction ID: D1607 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 2104 Eastern Ave		Amount of Each Disbursement this Period <div>166.23</div>	
City Davenport	State IA		Zip Code 52803-2004
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
C. Full Name (Last, First, Middle Initial) Devon M Brown		Transaction ID: D1608 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 2104 Eastern Ave		Amount of Each Disbursement this Period <div>434.04</div>	
City Davenport	State IA		Zip Code 52803-2004
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<div>1434.77</div>	
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 113 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Erica L Carnes		Transaction ID: D1609 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 153A Lark Ave		Amount of Each Disbursement this Period <div>161.61</div>
City Ames State IA Zip Code 50010-8032	<div>Category/Type</div>	
Purpose of Disbursement Net payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Erica L Carnes		Transaction ID: D1610 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 153A Lark Ave		Amount of Each Disbursement this Period <div>209.48</div>
City Ames State IA Zip Code 50010-8032	<div>Category/Type</div>	
Purpose of Disbursement Net payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Anna Casteel		Transaction ID: D1611 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 317 3rd St NE		Amount of Each Disbursement this Period <div>783.50</div>
City Waverly State IA Zip Code 50677-1734	<div>Category/Type</div>	
Purpose of Disbursement Net payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<div>1154.59</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 114 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Anna Casteel		Transaction ID: D1612 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address 317 3rd St NE			
City Waverly	State IA	Zip Code 50677-1734	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
B. Full Name (Last, First, Middle Initial) Elizabeth Cervantes		Transaction ID: D1613 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 2321 Central Ave			
City Bettendorf	State IA	Zip Code 52722-5061	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
C. Full Name (Last, First, Middle Initial) Elizabeth Cervantes		Transaction ID: D1614 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 2321 Central Ave			
City Bettendorf	State IA	Zip Code 52722-5061	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)

1308.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 115 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Steven M Chasse		Transaction ID: D1616 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>
Mailing Address 814 12th Ave		Amount of Each Disbursement this Period <div>1654.72</div>
City Coralville State IA Zip Code 52241-1733		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Brian T Christiansen		Transaction ID: D1617 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 4725 Happy Hollow Ln		Amount of Each Disbursement this Period <div>174.70</div>
City Lincoln State NE Zip Code 68516-5125		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Brian T Christiansen		Transaction ID: D1618 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 4725 Happy Hollow Ln		Amount of Each Disbursement this Period <div>376.57</div>
City Lincoln State NE Zip Code 68516-5125		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div>2205.99</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 116 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Jerodiah F Conley		Transaction ID: D1620 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address PO Box 253		Amount of Each Disbursement this Period <div>1733.58</div>	
City Council Bluffs	State IA		Zip Code 51502-0253
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Alexandra E Cooper		Transaction ID: D1621 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 217 Coe College		Amount of Each Disbursement this Period <div>180.93</div>	
City Cedar Rapids	State IA		Zip Code 52402
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Alexandra E Cooper		Transaction ID: D1622 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 217 Coe College		Amount of Each Disbursement this Period <div>390.84</div>	
City Cedar Rapids	State IA		Zip Code 52402
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

2305.35

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 117 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Michael S Cooper		Transaction ID: D1623 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 5811 Walnut Hill Ave		Amount of Each Disbursement this Period <div>193.93</div>
City Des Moines State IA Zip Code 50312-1434		
Purpose of Disbursement Net payroll	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Michael S Cooper		Transaction ID: D1624 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 5811 Walnut Hill Ave		Amount of Each Disbursement this Period <div>420.20</div>
City Des Moines State IA Zip Code 50312-1434		
Purpose of Disbursement Net payroll	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Krista K Cousins		Transaction ID: D1625 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 5643 Kirkwood Blvd SW Apt 1		Amount of Each Disbursement this Period <div>203.17</div>
City Cedar Rapids State IA Zip Code 52404-5284		
Purpose of Disbursement Net payroll	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

817.30

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 118 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Krista K Cousins		Transaction ID: D1626 Date of Disbursement <div> <div>06</div> <div>29</div> <div>2004</div> </div>	
Mailing Address 5643 Kirkwood Blvd SW Apt 1		Amount of Each Disbursement this Period <div>434.04</div>	
City Cedar Rapids	State IA		Zip Code 52404-5284
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Roger J Crimmins		Transaction ID: D1628 Date of Disbursement <div> <div>06</div> <div>30</div> <div>2004</div> </div>	
Mailing Address 418 1st St SE		Amount of Each Disbursement this Period <div>954.95</div>	
City Mason City	State IA		Zip Code 50401-3931
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Brianna J Crowley		Transaction ID: D1629 Date of Disbursement <div> <div>06</div> <div>29</div> <div>2004</div> </div>	
Mailing Address 1104 Warwick Dr		Amount of Each Disbursement this Period <div>397.10</div>	
City Cedar Falls	State IA		Zip Code 50613-1647
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

1786.09

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 119 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Ellen C Daly		Transaction ID: D1630 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 3226 West St Apt 1		Amount of Each Disbursement this Period <div>203.17</div>
City Ames State IA Zip Code 50014-3565		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Ellen C Daly		Transaction ID: D1631 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 3226 West St Apt 1		Amount of Each Disbursement this Period <div>438.66</div>
City Ames State IA Zip Code 50014-3565		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Lauren H Daumueller		Transaction ID: D1632 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 3801 Cottage Grove Ave		Amount of Each Disbursement this Period <div>189.32</div>
City Des Moines State IA Zip Code 50311-3605		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div>831.15</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 120 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Lauren H Daumueller		Transaction ID: D1633 Date of Disbursement <div> <div>06</div> <div>29</div> <div>2004</div> </div>	
Mailing Address 3801 Cottage Grove Ave			
City Des Moines	State IA	Zip Code 50311-3605	
Purpose of Disbursement Net payroll		<div> <div>397.10</div> </div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
B. Full Name (Last, First, Middle Initial) Chase O Davidson		Transaction ID: D1634 Date of Disbursement <div> <div>06</div> <div>15</div> <div>2004</div> </div>	
Mailing Address 616 Benson St			
City Council Bluffs	State IA	Zip Code 51501-1770	
Purpose of Disbursement Net payroll		<div> <div>184.70</div> </div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
C. Full Name (Last, First, Middle Initial) Chase O Davidson		Transaction ID: D1635 Date of Disbursement <div> <div>06</div> <div>29</div> <div>2004</div> </div>	
Mailing Address 616 Benson St			
City Council Bluffs	State IA	Zip Code 51501-1770	
Purpose of Disbursement Net payroll		<div> <div>381.57</div> </div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)

963.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 121 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Miranda R Davidson		Transaction ID: D1636 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	5		2	0	0	4													
Mailing Address 616 Benson St		Amount of Each Disbursement this Period <table border="1"> <tr> <td>184.70</td> </tr> </table>	184.70																			
184.70																						
City Council Bluffs	State IA		Zip Code 51501-1770																			
Purpose of Disbursement Net payroll			Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																						
B. Full Name (Last, First, Middle Initial) Miranda R Davidson		Transaction ID: D1637 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	9		2	0	0	4													
Mailing Address 616 Benson St		Amount of Each Disbursement this Period <table border="1"> <tr> <td>415.57</td> </tr> </table>	415.57																			
415.57																						
City Council Bluffs	State IA		Zip Code 51501-1770																			
Purpose of Disbursement Net payroll			Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																						
C. Full Name (Last, First, Middle Initial) DemStore.com		Transaction ID: D1536 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	8		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	8		2	0	0	4													
Mailing Address 5104 Macarthur Blvd NW		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1305.00</td> </tr> </table>	1305.00																			
1305.00																						
City Washington	State DC		Zip Code 20016-3316																			
Purpose of Disbursement Grassroots Campaign Materials			Category/ Type																			
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																						

SUBTOTAL of Disbursements This Page (optional)

1905.27

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 122 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Janelle M Domeyer		Transaction ID: D1639 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address 1916 Parkwild Dr Apt 50		Amount of Each Disbursement this Period <div>831.50</div>	
City Council Bluffs	State IA		Zip Code 51503-1875
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Erin A Driesbach		Transaction ID: D1640 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 1820 S 41st St		Amount of Each Disbursement this Period <div>172.70</div>	
City Lincoln	State NE		Zip Code 68506-1103
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Erin A Driesbach		Transaction ID: D1641 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 1820 S 41st St		Amount of Each Disbursement this Period <div>364.57</div>	
City Lincoln	State NE		Zip Code 68506-1103
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

1368.77

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 123 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Matthew M Duffy		Transaction ID: D1642 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 2935 Eisenhower Ave		Amount of Each Disbursement this Period <div>212.40</div>
City Ames State IA Zip Code 50010-4305		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Matthew M Duffy		Transaction ID: D1643 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 2935 Eisenhower Ave		Amount of Each Disbursement this Period <div>547.68</div>
City Ames State IA Zip Code 50010-4305		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Sarah J Dumdei		Transaction ID: D1644 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 2116 Olive St Apt 3		Amount of Each Disbursement this Period <div>204.10</div>
City Cedar Falls State IA Zip Code 50613-3777		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div>964.18</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 124 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Sarah J Dumdei		Transaction ID: D1645 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 2116 Olive St Apt 3		Amount of Each Disbursement this Period <div>429.42</div>	
City Cedar Falls	State IA		Zip Code 50613-3777
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Jessica L Ellerbach		Transaction ID: D1646 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 4455 Montclair Ct		Amount of Each Disbursement this Period <div>184.70</div>	
City Bettendorf	State IA		Zip Code 52722-2226
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Jessica L Ellerbach		Transaction ID: D1647 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 4455 Montclair Ct		Amount of Each Disbursement this Period <div>456.93</div>	
City Bettendorf	State IA		Zip Code 52722-2226
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<div>1071.05</div>	
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 125 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Ann C Erickson		Transaction ID: D1648 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 2602 18 St B		Amount of Each Disbursement this Period <div>184.70</div>
City Moline	State IL Zip Code 61265	
Purpose of Disbursement Net payroll		
Candidate Name		
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Ann C Erickson		Transaction ID: D1649 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 2602 18 St B		Amount of Each Disbursement this Period <div>431.28</div>
City Moline	State IL Zip Code 61265	
Purpose of Disbursement Net payroll		
Candidate Name		
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Christian K Evans		Transaction ID: D1650 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 2105 Exchange St		Amount of Each Disbursement this Period <div>204.64</div>
City Keokuk	State IA Zip Code 52632-2720	
Purpose of Disbursement Net payroll		
Candidate Name		
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

820.62

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 126 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Christian K Evans		Transaction ID: D1651 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 2105 Exchange St		Amount of Each Disbursement this Period <div>407.98</div>	
City Keokuk	State IA		Zip Code 52632-2720
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Nicolas J Ferre		Transaction ID: D1653 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address 824 Whitman Ct		Amount of Each Disbursement this Period <div>980.46</div>	
City Libertyville	State IL		Zip Code 60048-1667
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Mark R Fetterhoff		Transaction ID: D1654 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 1310 30th St		Amount of Each Disbursement this Period <div>392.04</div>	
City Des Moines	State IA		Zip Code 50311-2904
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<div>1780.48</div>	
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 127 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Alexander V Fisher		Transaction ID: D1655 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 164 Hummingbird Ln		Amount of Each Disbursement this Period <div>203.17</div>
City Iowa City State IA Zip Code 52245-9257		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Alexander V Fisher		Transaction ID: D1656 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 164 Hummingbird Ln		Amount of Each Disbursement this Period <div>434.04</div>
City Iowa City State IA Zip Code 52245-9257		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Lucas P Forte		Transaction ID: D1657 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 1124 Oakcrest St Apt 12		Amount of Each Disbursement this Period <div>192.93</div>
City Iowa City State IA Zip Code 52246-5165		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

830.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 128 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Lucas P Forte		Transaction ID: D1658 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 1124 Oakcrest St Apt 12		Amount of Each Disbursement this Period <div>458.75</div>	
City Iowa City State IA Zip Code 52246-5165	Purpose of Disbursement Net payroll		<div>Category/ Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Brad T Frevert			
Mailing Address 2801 Woodland Ave		Amount of Each Disbursement this Period <div>1253.37</div>	
City West Des Moines State IA Zip Code 50266-2031	Purpose of Disbursement Net payroll		<div>Category/ Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Josiah R Friction			
Mailing Address 505 E Burlington St		Amount of Each Disbursement this Period <div>203.17</div>	
City Iowa City State IA Zip Code 52240-1969	Purpose of Disbursement Net payroll		<div>Category/ Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ►

1915.29

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 129 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Josiah R Friction		Transaction ID: D1662 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 505 E Burlington St		Amount of Each Disbursement this Period <div>391.20</div>
City Iowa City State IA Zip Code 52240-1969		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Jake D Friedrichsen		Transaction ID: D1663 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 818 W Seerley Blvd		Amount of Each Disbursement this Period <div>189.17</div>
City Cedar Falls State IA Zip Code 50613-3763		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Jake D Friedrichsen		Transaction ID: D1664 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 818 W Seerley Blvd		Amount of Each Disbursement this Period <div>346.49</div>
City Cedar Falls State IA Zip Code 50613-3763		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

926.86

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 130 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Edward A Furchtenicht		Transaction ID: D1665 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 621 19th St		Amount of Each Disbursement this Period <div>204.79</div>	
City Des Moines	State IA		Zip Code 50309-3301
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Edward A Furchtenicht		Transaction ID: D1666 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 621 19th St		Amount of Each Disbursement this Period <div>329.54</div>	
City Des Moines	State IA		Zip Code 50309-3301
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Ezekiel L Furlong		Transaction ID: D1668 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address 705 Maynard Ave		Amount of Each Disbursement this Period <div>953.50</div>	
City Waterloo	State IA		Zip Code 50701-2121
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<div>1487.83</div>	
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 131 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Francoise E Galleto

Mailing Address 57 Lower Via Casitas

City Greenbrae State CA Zip Code 94904-2228

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1669

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1056.03

Full Name (Last, First, Middle Initial)

B. Amy M Gallmeyer

Mailing Address 2425 Crane Creek Rd

City Waterloo State IA Zip Code 50703-9257

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1670

Date of Disbursement

/ /

Amount of Each Disbursement this Period

203.17

Full Name (Last, First, Middle Initial)

C. Amy M Gallmeyer

Mailing Address 2425 Crane Creek Rd

City Waterloo State IA Zip Code 50703-9257

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1671

Date of Disbursement

/ /

Amount of Each Disbursement this Period

466.37

SUBTOTAL of Disbursements This Page (optional)

1725.57

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 132 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Kurt W Garretson		Transaction ID: D1672 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 1878 Salem Rd		Amount of Each Disbursement this Period <div>521.78</div>
City Salem State IA Zip Code 52649-9452		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Adriann E Gerardi		Transaction ID: D1674 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>
Mailing Address 1440 Blairs Ferry Rd NE		Amount of Each Disbursement this Period <div>793.50</div>
City Cedar Rapids State IA Zip Code 52402-1228		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Corey J Goerd		Transaction ID: D1675 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 4701 86th PI		Amount of Each Disbursement this Period <div>189.32</div>
City Urbandale State IA Zip Code 50322		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1504.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 133 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Corey J Goerdts		Transaction ID: D1676 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 4701 86th PI			
City Urbandale	State IA	Zip Code 50322	Amount of Each Disbursement this Period <div>374.01</div>
Purpose of Disbursement Net payroll		<div></div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
B. Full Name (Last, First, Middle Initial) Edward J Goodman		Transaction ID: D1859 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 1306 Tomahawk Dr			
City Dubuque	State IA	Zip Code 52003-7878	Amount of Each Disbursement this Period <div>180.93</div>
Purpose of Disbursement Net payroll		<div></div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
C. Full Name (Last, First, Middle Initial) Edward J Goodman		Transaction ID: D1860 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 1306 Tomahawk Dr			
City Dubuque	State IA	Zip Code 52003-7878	Amount of Each Disbursement this Period <div>435.23</div>
Purpose of Disbursement Net payroll		<div></div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)

990.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 134 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Charles F Goyer		Transaction ID: D1677 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 6223 Frederiksen Ct			
City Ames	State IA	Zip Code 50010-4045	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>60.03</div>	
B. Full Name (Last, First, Middle Initial) Shannon K Griffiths		Transaction ID: D1678 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 2422 Hull Ave			
City Des Moines	State IA	Zip Code 50317-3630	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>189.32</div>	
C. Full Name (Last, First, Middle Initial) Shannon K Griffiths		Transaction ID: D1679 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 2422 Hull Ave			
City Des Moines	State IA	Zip Code 50317-3630	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Amount of Each Disbursement this Period <div>184.70</div>	

SUBTOTAL of Disbursements This Page (optional)

434.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 135 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Tavis M Hall		Transaction ID: D1680 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	5		2	0	0	4													
Mailing Address 1111 Forest Ave		Amount of Each Disbursement this Period <table border="1"> <tr> <td>190.10</td> </tr> </table>	190.10																			
190.10																						
City Waterloo State IA Zip Code 50702-3134																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) Tavis M Hall		Transaction ID: D1681 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	9		2	0	0	4													
Mailing Address 1111 Forest Ave		Amount of Each Disbursement this Period <table border="1"> <tr> <td>372.81</td> </tr> </table>	372.81																			
372.81																						
City Waterloo State IA Zip Code 50702-3134																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) Robert L Hamill		Transaction ID: D1683 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		3	0		2	0	0	4													
Mailing Address 3407 Grand Ave Apt 122		Amount of Each Disbursement this Period <table border="1"> <tr> <td>813.50</td> </tr> </table>	813.50																			
813.50																						
City Des Moines State IA Zip Code 50312-4111																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)

1376.41

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 136 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Richard E Harman		Transaction ID: D1686 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 258 N Hyland Ave Apt 1		Amount of Each Disbursement this Period <div>165.40</div>
City Ames State IA Zip Code 50014-2863		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Richard E Harman		Transaction ID: D1687 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 258 N Hyland Ave Apt 1		Amount of Each Disbursement this Period <div>435.55</div>
City Ames State IA Zip Code 50014-2863		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Jesse G Harris		Transaction ID: D1689 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>
Mailing Address 975 Applewood Ln		Amount of Each Disbursement this Period <div>1159.83</div>
City Waukegan State IA Zip Code 50263-8267		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

1760.78

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 137 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Megan E Heneke

Mailing Address 712 E Market St

City Iowa City State IA Zip Code 52245-2657

Purpose of Disbursement

Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1692

Date of Disbursement

/ /

Amount of Each Disbursement this Period

919.16

Full Name (Last, First, Middle Initial)

B. Jack N Herbert

Mailing Address 327 E College St
Apt 1718

City Iowa City State IA Zip Code 52240-1685

Purpose of Disbursement

Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1693

Date of Disbursement

/ /

Amount of Each Disbursement this Period

202.17

Full Name (Last, First, Middle Initial)

C. Jack N Herbert

Mailing Address 327 E College St
Apt 1718

City Iowa City State IA Zip Code 52240-1685

Purpose of Disbursement

Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1694

Date of Disbursement

/ /

Amount of Each Disbursement this Period

417.00

SUBTOTAL of Disbursements This Page (optional)

1538.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 138 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Elizabeth E Hilkin		Transaction ID: D1695 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 1922 Gnahn St		Amount of Each Disbursement this Period <div>221.64</div>	
City Burlington	State IA		Zip Code 52601-4406
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Elizabeth E Hilkin		Transaction ID: D1696 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 1922 Gnahn St		Amount of Each Disbursement this Period <div>526.39</div>	
City Burlington	State IA		Zip Code 52601-4406
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Javarra M Hodge		Transaction ID: D1697 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 227 Madison St		Amount of Each Disbursement this Period <div>203.17</div>	
City Waterloo	State IA		Zip Code 50703-4239
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

951.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 139 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Javarra M Hodge		Transaction ID: D1698 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 227 Madison St		Amount of Each Disbursement this Period <div>466.37</div>
City Waterloo State IA Zip Code 50703-4239		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Amanda A Hollis		Transaction ID: D1699 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 510 Billy Sunday Rd		Amount of Each Disbursement this Period <div>201.17</div>
City Ames State IA Zip Code 50010-8110		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Amanda A Hollis		Transaction ID: D1700 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 510 Billy Sunday Rd		Amount of Each Disbursement this Period <div>414.13</div>
City Ames State IA Zip Code 50010-8110		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ►

1081.67

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 140 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Alison R Hoyer		Transaction ID: D1701 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 504 W Monroe St		Amount of Each Disbursement this Period <div>221.64</div>	
City Mt Pleasant	State IA		Zip Code 52641-2119
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Alison R Hoyer		Transaction ID: D1702 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 504 W Monroe St		Amount of Each Disbursement this Period <div>487.60</div>	
City Mt Pleasant	State IA		Zip Code 52641-2119
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Patrick N Hultman		Transaction ID: D1703 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 3004 Ross Rd		Amount of Each Disbursement this Period <div>197.40</div>	
City Ames	State IA		Zip Code 50014-4033
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

906.64

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 141 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Patrick N Hultman		Transaction ID: D1704 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 3004 Ross Rd		Amount of Each Disbursement this Period <div>216.54</div>
City Ames State IA Zip Code 50014-4033		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Benjamin G Humphrey		Transaction ID: D1706 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>
Mailing Address 705 Maynard Ave		Amount of Each Disbursement this Period <div>831.50</div>
City Waterloo State IA Zip Code 50701-2121		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Internal Revenue Service		Transaction ID: D1707 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 8 / 2 0 0 4</div> </div>
Mailing Address SERVICE Center		Amount of Each Disbursement this Period <div>3349.98</div>
City Ogden State UT Zip Code 84201-0039		
Purpose of Disbursement 941 deposit	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div>4398.02</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 142 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address SERVICE Center

City Ogden State UT Zip Code 84201-0039

Purpose of Disbursement
941 deposit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1709

Date of Disbursement

/ /

Amount of Each Disbursement this Period

8844.96

Full Name (Last, First, Middle Initial)

B. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Transfer for cash flow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1712

Date of Disbursement

/ /

Amount of Each Disbursement this Period

908.87

Full Name (Last, First, Middle Initial)

C. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Transfer for cash flow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1711

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2665.21

SUBTOTAL of Disbursements This Page (optional)

12419.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 143 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
State unemployment tax deposit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1717

Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

904.06

Full Name (Last, First, Middle Initial)

B. Iowa Democratic Party - State Account

Mailing Address 5661 Fleur Dr

City Des Moines State IA Zip Code 50321-2841

Purpose of Disbursement
Mileage allowances to field canvass

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1716

Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

2221.18

Full Name (Last, First, Middle Initial)

C. Jeffrey D Jacobs

Mailing Address 3415 119th Avenue Ct W

City Milan State IL Zip Code 61264-4500

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1718

Date of Disbursement

06 / 15 / 2004

Amount of Each Disbursement this Period

172.70

SUBTOTAL of Disbursements This Page (optional)

3297.94

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 144 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Jeffrey D Jacobs		Transaction ID: D1719 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 3415 119th Avenue Ct W		Amount of Each Disbursement this Period <div>384.51</div>
City Milan State IL Zip Code 61264-4500	<div>Category/Type</div>	
Purpose of Disbursement Net payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Michelle L Johnson		Transaction ID: D1547 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>
Mailing Address 4001 Ep True Pkwy		Amount of Each Disbursement this Period <div>880.85</div>
City West Des Moines State IA Zip Code 50265-7638	<div>Category/Type</div>	
Purpose of Disbursement Net payroll-Federal fundraising		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Shayla Kasel		Transaction ID: D1549 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>
Mailing Address 2403 35th St		Amount of Each Disbursement this Period <div>2836.16</div>
City Des Moines State IA Zip Code 50310-4550	<div>Category/Type</div>	
Purpose of Disbursement Net payroll-Federal fundraising		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

4101.52

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 145 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Ashley R Kockler		Transaction ID: D1720 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 705 14th Street PI		Amount of Each Disbursement this Period <div>191.17</div>
City Nevada State IA Zip Code 50201-2405		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Ashley R Kockler		Transaction ID: D1721 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 705 14th Street PI		Amount of Each Disbursement this Period <div>562.39</div>
City Nevada State IA Zip Code 50201-2405		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Golden Krishna		Transaction ID: D1722 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 3901 Stonebridge Rd		Amount of Each Disbursement this Period <div>180.93</div>
City West Des Moines State IA Zip Code 50265-3963		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<div>934.49</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 146 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Golden Krishna

Mailing Address 3901 Stonebridge Rd

City State Zip Code
West Des Moines IA 50265-3963

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1723

Date of Disbursement

/ /

Amount of Each Disbursement this Period

332.02

Full Name (Last, First, Middle Initial)

B. Elisa K Kruse

Mailing Address 319 Stutsman St

City State Zip Code
Council Bluffs IA 51503-4534

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1724

Date of Disbursement

/ /

Amount of Each Disbursement this Period

172.70

Full Name (Last, First, Middle Initial)

C. Elisa K Kruse

Mailing Address 319 Stutsman St

City State Zip Code
Council Bluffs IA 51503-4534

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1725

Date of Disbursement

/ /

Amount of Each Disbursement this Period

328.40

SUBTOTAL of Disbursements This Page (optional)

833.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 147 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Alison N Kurth		Transaction ID: D1727 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address 415 E 14th St		Amount of Each Disbursement this Period <div>909.90</div>	
City Davenport	State IA		Zip Code 52803-4403
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Eric J Langston		Transaction ID: D1728 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 4257 Sunland Ct SE		Amount of Each Disbursement this Period <div>211.40</div>	
City Cedar Rapids	State IA		Zip Code 52403-2119
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Eric J Langston		Transaction ID: D1729 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 4257 Sunland Ct SE		Amount of Each Disbursement this Period <div>429.14</div>	
City Cedar Rapids	State IA		Zip Code 52403-2119
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional) ▶		<div>1550.44</div>	
TOTAL This Period (last page this line number only) ▶			

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 148 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Matthew C Lees

Mailing Address 5848 Hunt Rd

City Burlington State IA Zip Code 52601-8908

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1730

Date of Disbursement

/ /

Amount of Each Disbursement this Period

221.64

Full Name (Last, First, Middle Initial)

B. Matthew C Lees

Mailing Address 5848 Hunt Rd

City Burlington State IA Zip Code 52601-8908

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1731

Date of Disbursement

/ /

Amount of Each Disbursement this Period

488.53

Full Name (Last, First, Middle Initial)

C. Nicholas R Leitheiser

Mailing Address 4625 Steinbeck St
Apt 11

City Ames State IA Zip Code 50014-8140

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1733

Date of Disbursement

/ /

Amount of Each Disbursement this Period

967.77

SUBTOTAL of Disbursements This Page (optional)

1677.94

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 149 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Amy N Levy		Transaction ID: D1735 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address 9848 Brookview Dr		Amount of Each Disbursement this Period <div>831.50</div>	
City Urbandale	State IA		Zip Code 50322-6248
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Nicholas J Liker		Transaction ID: D1736 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 218 N Hyland Ave Apt 201		Amount of Each Disbursement this Period <div>184.70</div>	
City Ames	State IA		Zip Code 50014-7452
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Mitchell D Lingo		Transaction ID: D1737 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 2535 Heather View Cir		Amount of Each Disbursement this Period <div>202.17</div>	
City Marion	State IA		Zip Code 52302-6414
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<div>1218.37</div>	
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 150 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Mitchell D Lingo		Transaction ID: D1738 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 2535 Heather View Cir		Amount of Each Disbursement this Period <div>393.43</div>
City Marion State IA Zip Code 52302-6414		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Abigail A Longstreet		Transaction ID: D1740 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>
Mailing Address 572 S Cedar Ave		Amount of Each Disbursement this Period <div>1036.37</div>
City Elmhurst State IL Zip Code 60126-4136		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Rachel E Madden		Transaction ID: D1741 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 831 E Jefferson St Apt 12		Amount of Each Disbursement this Period <div>172.70</div>
City Iowa City State IA Zip Code 52245-2439		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

1602.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 151 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Rachel E Madden Full Name (Last, First, Middle Initial) Mailing Address 831 E Jefferson St Apt 12 City Iowa City State IA Zip Code 52245-2439 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1742 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4 Amount of Each Disbursement this Period 427.07
B. Samuel C McCormally Full Name (Last, First, Middle Initial) Mailing Address 12828 Kettering Dr City Herndon State VA Zip Code 20171-2447 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1743 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 4 Amount of Each Disbursement this Period 204.64
C. Samuel C McCormally Full Name (Last, First, Middle Initial) Mailing Address 12828 Kettering Dr City Herndon State VA Zip Code 20171-2447 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1744 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4 Amount of Each Disbursement this Period 398.13
SUBTOTAL of Disbursements This Page (optional) ▶		1029.84
TOTAL This Period (last page this line number only) ▶		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 152 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) John D McMillin		Transaction ID: D1745 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 821 W 28th St		Amount of Each Disbursement this Period <div>204.10</div>	
City Cedar Falls State IA Zip Code 50613-5018			
Purpose of Disbursement Net payroll	<div>Category/Type</div>		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) John D McMillin		Transaction ID: D1746 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 821 W 28th St		Amount of Each Disbursement this Period <div>424.81</div>	
City Cedar Falls State IA Zip Code 50613-5018			
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Jamie McQuillen-Benge		Transaction ID: D1747 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 2515 Tremont St		Amount of Each Disbursement this Period <div>189.17</div>	
City Cedar Falls State IA Zip Code 50613-3950			
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)		<div>818.08</div>	
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 153 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Jamie McQuillen-Benge		Transaction ID: D1748 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 2515 Tremont St		Amount of Each Disbursement this Period <div>350.10</div>
City Cedar Falls State IA Zip Code 50613-3950		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Kyle L Meck		Transaction ID: D1749 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 15206 145th Ave		Amount of Each Disbursement this Period <div>221.64</div>
City Burlington State IA Zip Code 52601-8749		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Kyle L Meck		Transaction ID: D1750 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 15206 145th Ave		Amount of Each Disbursement this Period <div>427.58</div>
City Burlington State IA Zip Code 52601-8749		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

999.32

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 154 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Andrew P Mertens		Transaction ID: D1751 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 2808 Garden Cir		Amount of Each Disbursement this Period <div>221.64</div>
City Burlington State IA Zip Code 52601-1539		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Andrew P Mertens		Transaction ID: D1752 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 2808 Garden Cir		Amount of Each Disbursement this Period <div>487.60</div>
City Burlington State IA Zip Code 52601-1539		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Amanda L Miller		Transaction ID: D1753 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 1133 Grand Blvd		Amount of Each Disbursement this Period <div>353.25</div>
City Cedar Falls State IA Zip Code 50613-4305		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div>1062.49</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 155 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Andrew J Miller		Transaction ID: D1754 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 801 Crawford Ave Apt 3		Amount of Each Disbursement this Period <div>203.17</div>
City Ames State IA Zip Code 50010-6392		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Andrew J Miller		Transaction ID: D1755 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 801 Crawford Ave Apt 3		Amount of Each Disbursement this Period <div>452.51</div>
City Ames State IA Zip Code 50010-6392		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Maria M Misra		Transaction ID: D1756 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 517 Iowa Ave Apt 4A		Amount of Each Disbursement this Period <div>172.70</div>
City Iowa City State IA Zip Code 52240-1814		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

828.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 156 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Maria M Misra Full Name (Last, First, Middle Initial) Mailing Address 517 Iowa Ave Apt 4A City Iowa City State IA Zip Code 52240-1814 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1757 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4 Amount of Each Disbursement this Period 425.08
B. Brendon D Moe Full Name (Last, First, Middle Initial) Mailing Address 3202 University Dr Apt K2 City Cedar Falls State IA Zip Code 50613-4871 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1758 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 4 Amount of Each Disbursement this Period 203.17
C. Brendon D Moe Full Name (Last, First, Middle Initial) Mailing Address 3202 University Dr Apt K2 City Cedar Falls State IA Zip Code 50613-4871 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1759 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4 Amount of Each Disbursement this Period 304.75
SUBTOTAL of Disbursements This Page (optional)		933.00
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 157 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Andrew N Monson		Transaction ID: D1760 Date of Disbursement <div> <div>06</div> <div>15</div> <div>2004</div> </div>	
Mailing Address 5621 S 170th St		Amount of Each Disbursement this Period <div>174.70</div>	
City Omaha	State NE		Zip Code 68135-2257
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Andrew N Monson		Transaction ID: D1761 Date of Disbursement <div> <div>06</div> <div>29</div> <div>2004</div> </div>	
Mailing Address 5621 S 170th St		Amount of Each Disbursement this Period <div>338.40</div>	
City Omaha	State NE		Zip Code 68135-2257
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Nathan A Monson		Transaction ID: D1762 Date of Disbursement <div> <div>06</div> <div>15</div> <div>2004</div> </div>	
Mailing Address 406 S Western Hills Dr		Amount of Each Disbursement this Period <div>189.17</div>	
City Algona	State IA		Zip Code 50511-5014
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

702.27

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 158 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Nathan A Monson Full Name (Last, First, Middle Initial) Mailing Address 406 S Western Hills Dr City Algona State IA Zip Code 50511-5014 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1763 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4 Amount of Each Disbursement this Period 387.28
B. Amy C Murray Full Name (Last, First, Middle Initial) Mailing Address 250 Courtyard Dr Apt 110 City Dakota Dunes State SD Zip Code 57049-5179 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1765 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4 Amount of Each Disbursement this Period 793.50
C. Ramona J Muse Full Name (Last, First, Middle Initial) Mailing Address 1704 Q Ave City Madrid State IA Zip Code 50156-7575 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1766 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 4 Amount of Each Disbursement this Period 201.17
SUBTOTAL of Disbursements This Page (optional) ▶		1381.95
TOTAL This Period (last page this line number only) ▶		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 159 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Ramona J Muse		Transaction ID: D1767 Date of Disbursement <div> <div>06</div> <div>29</div> <div>2004</div> </div>	
Mailing Address 1704 Q Ave			
City Madrid	State IA	Zip Code 50156-7575	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
B. Full Name (Last, First, Middle Initial) Maria G Navarro		Transaction ID: D1768 Date of Disbursement <div> <div>06</div> <div>29</div> <div>2004</div> </div>	
Mailing Address 5673 18th St			
City Bettendorf	State IA	Zip Code 52722-7531	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
C. Full Name (Last, First, Middle Initial) Keith E Nelson		Transaction ID: D1769 Date of Disbursement <div> <div>06</div> <div>15</div> <div>2004</div> </div>	
Mailing Address 531 Benjamin Blvd			
City Pleasant Hill	State IA	Zip Code 50327-2119	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<div>943.49</div>	
TOTAL This Period (last page this line number only)		<div></div>	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 160 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Keith E Nelson		Transaction ID: D1770 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	9		2	0	0	4													
Mailing Address 531 Benjamin Blvd		Amount of Each Disbursement this Period <table border="1"> <tr> <td>429.43</td> </tr> </table>	429.43																			
429.43																						
City Pleasant Hill State IA Zip Code 50327-2119																						
Purpose of Disbursement Net payroll	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>		Category/ Type																			
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) Ethan A Newlin		Transaction ID: D1771 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	5		2	0	0	4													
Mailing Address 200 Stanton Ave Apt 503		Amount of Each Disbursement this Period <table border="1"> <tr> <td>189.17</td> </tr> </table>	189.17																			
189.17																						
City Ames State IA Zip Code 50014-6806																						
Purpose of Disbursement Net payroll	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>		Category/ Type																			
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) Ethan A Newlin		Transaction ID: D1772 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	9		2	0	0	4													
Mailing Address 200 Stanton Ave Apt 503		Amount of Each Disbursement this Period <table border="1"> <tr> <td>406.34</td> </tr> </table>	406.34																			
406.34																						
City Ames State IA Zip Code 50014-6806																						
Purpose of Disbursement Net payroll	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>		Category/ Type																			
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
SUBTOTAL of Disbursements This Page (optional)		<table border="1"> <tr> <td>1024.94</td> </tr> </table>	1024.94																			
1024.94																						
TOTAL This Period (last page this line number only)		<table border="1"> <tr> <td></td> </tr> </table>																				

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 161 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) John P Noonan		Transaction ID: D1773 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 1707 Navajo St		Amount of Each Disbursement this Period <div>221.64</div>	
City Burlington	State IA		Zip Code 52601-3489
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) John P Noonan		Transaction ID: D1774 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 1707 Navajo St		Amount of Each Disbursement this Period <div>526.39</div>	
City Burlington	State IA		Zip Code 52601-3489
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Matthew W Opad		Transaction ID: D1775 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 922 E Washington St Apt 4		Amount of Each Disbursement this Period <div>184.70</div>	
City Iowa City	State IA		Zip Code 52240-5202
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

932.73

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 162 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Matthew W Opad

Mailing Address 922 E Washington St
Apt 4

City Iowa City State IA Zip Code 52240-5202

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1776

Date of Disbursement

/ /

Amount of Each Disbursement this Period

526.77

Full Name (Last, First, Middle Initial)

B. Jordan E Oster

Mailing Address 1637 NW 122nd St

City Clive State IA Zip Code 50325-8112

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1777

Date of Disbursement

/ /

Amount of Each Disbursement this Period

92.35

Full Name (Last, First, Middle Initial)

C. Jordan E Oster

Mailing Address 1637 NW 122nd St

City Clive State IA Zip Code 50325-8112

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1778

Date of Disbursement

/ /

Amount of Each Disbursement this Period

420.19

SUBTOTAL of Disbursements This Page (optional)

1039.31

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 163 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Katy L Pearson		Transaction ID: D1779 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	5		2	0	0	4													
Mailing Address 525 Iowa Ave Apt 2		Amount of Each Disbursement this Period <table border="1"> <tr> <td>179.70</td> </tr> </table>	179.70																			
179.70																						
City Iowa City State IA Zip Code 52240-1834																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) Katy L Pearson		Transaction ID: D1780 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	9		2	0	0	4													
Mailing Address 525 Iowa Ave Apt 2		Amount of Each Disbursement this Period <table border="1"> <tr> <td>445.31</td> </tr> </table>	445.31																			
445.31																						
City Iowa City State IA Zip Code 52240-1834																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) William T Pepper		Transaction ID: D1781 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	5		2	0	0	4													
Mailing Address 2483 Grande Ave SE		Amount of Each Disbursement this Period <table border="1"> <tr> <td>203.17</td> </tr> </table>	203.17																			
203.17																						
City Cedar Rapids State IA Zip Code 52403-2817																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
SUBTOTAL of Disbursements This Page (optional)		<table border="1"> <tr> <td>828.18</td> </tr> </table>	828.18																			
828.18																						
TOTAL This Period (last page this line number only)		<table border="1"> <tr> <td></td> </tr> </table>																				

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 164 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) William T Pfeffer		Transaction ID: D1782 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 2483 Grande Ave SE			
City Cedar Rapids	State IA	Zip Code 52403-2817	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
B. Full Name (Last, First, Middle Initial) Joseph F Pieper		Transaction ID: D1784 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address 3335 325th St			
City Dexter	State IA	Zip Code 50070-7529	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
C. Full Name (Last, First, Middle Initial) Sandra E Reich		Transaction ID: D1785 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 1519 29th St			
City Moline	State IL	Zip Code 61265-3317	
Purpose of Disbursement Net payroll		<div> <div>Category/Type</div> <div></div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)

1659.88

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 165 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Courtney M Rickert

Mailing Address 1306 34th St
Apt 27

City Des Moines State IA Zip Code 50311-2722

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1787

Date of Disbursement

/ /

Amount of Each Disbursement this Period

813.50

Full Name (Last, First, Middle Initial)

B. Philip F Rippke

Mailing Address 2109 College St
Apt 49

City Cedar Falls State IA Zip Code 50613-3681

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1788

Date of Disbursement

/ /

Amount of Each Disbursement this Period

204.10

Full Name (Last, First, Middle Initial)

C. Philip F Rippke

Mailing Address 2109 College St
Apt 49

City Cedar Falls State IA Zip Code 50613-3681

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1789

Date of Disbursement

/ /

Amount of Each Disbursement this Period

429.42

SUBTOTAL of Disbursements This Page (optional)

1447.02

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 166 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Oliver Roeder		Transaction ID: D1790 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 110 Lincoln Place Dr		Amount of Each Disbursement this Period <div>69.26</div>
City Des Moines State IA Zip Code 50312-4504		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Oliver Roeder		Transaction ID: D1791 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 110 Lincoln Place Dr		Amount of Each Disbursement this Period <div>457.13</div>
City Des Moines State IA Zip Code 50312-4504		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Crystal Roldan		Transaction ID: D1792 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 766 Charlotte Ave		Amount of Each Disbursement this Period <div>166.23</div>
City Davenport State IA Zip Code 52803-5725		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

692.62

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 167 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Crystal Roldan Full Name (Last, First, Middle Initial) Mailing Address 766 Charlotte Ave City Davenport State IA Zip Code 52803-5725 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1793 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4 Amount of Each Disbursement this Period 435.90
B. Shawn M Rolland Full Name (Last, First, Middle Initial) Mailing Address 1243 34th St City Des Moines State IA Zip Code 50311-2701 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1795 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 4 Amount of Each Disbursement this Period 811.50
C. Jennifer A Rysdam Full Name (Last, First, Middle Initial) Mailing Address Buena Vista University Box 2676 City Storm Lake State IA Zip Code 50588 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1861 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 4 Amount of Each Disbursement this Period 184.70
SUBTOTAL of Disbursements This Page (optional) ▶		1432.10
TOTAL This Period (last page this line number only) ▶		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 168 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Jennifer A Rysdam		Transaction ID: D1796 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address Buena Vista University Box 2676		Amount of Each Disbursement this Period <div>538.38</div>
City Storm Lake State IA Zip Code 50588		
Purpose of Disbursement Net payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Hannah J Schoenthal-Muse		Transaction ID: D1798 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>
Mailing Address 2102 44th St		Amount of Each Disbursement this Period <div>1001.56</div>
City Des Moines State IA Zip Code 50310-3011		
Purpose of Disbursement Net payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Alan F Schultz		Transaction ID: D1799 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 1635 26th St NW		Amount of Each Disbursement this Period <div>192.93</div>
City Cedar Rapids State IA Zip Code 52405-1420		
Purpose of Disbursement Net payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div>1732.87</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 169 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Alan F Schultz		Transaction ID: D1800 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 1635 26th St NW		Amount of Each Disbursement this Period <div>438.77</div>	
City Cedar Rapids	State IA		Zip Code 52405-1420
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Secretary of State		Transaction ID: D1498 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 0 / 2 0 0 4</div> </div>	
Mailing Address Hoover Building		Amount of Each Disbursement this Period <div>53.68</div>	
City Des Moines	State IA		Zip Code 50319-0106
Purpose of Disbursement Voter file update			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Secretary of State		Transaction ID: D1528 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address Hoover Building		Amount of Each Disbursement this Period <div>47.94</div>	
City Des Moines	State IA		Zip Code 50319-0106
Purpose of Disbursement Voter file update			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

540.39

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 170 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Wooi J See

Mailing Address 1019 Sioux Dr NW

City Cedar Rapids State IA Zip Code 52405-2338

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1801

Date of Disbursement

/ /

Amount of Each Disbursement this Period

184.70

Full Name (Last, First, Middle Initial)

B. Wooi J See

Mailing Address 1019 Sioux Dr NW

City Cedar Rapids State IA Zip Code 52405-2338

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1802

Date of Disbursement

/ /

Amount of Each Disbursement this Period

445.54

Full Name (Last, First, Middle Initial)

C. Christopher A Sime

Mailing Address 803 Franklin St

City Cedar Falls State IA Zip Code 50613-2966

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1803

Date of Disbursement

/ /

Amount of Each Disbursement this Period

202.17

SUBTOTAL of Disbursements This Page (optional)

832.41

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 171 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Christopher A Sime		Transaction ID: D1804 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	9		2	0	0	4													
Mailing Address 803 Franklin St		Amount of Each Disbursement this Period <table border="1"> <tr> <td>408.90</td> </tr> </table>	408.90																			
408.90																						
City Cedar Falls	State IA		Zip Code 50613-2966																			
Purpose of Disbursement Net payroll			<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																		
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) Jayme A Sime		Transaction ID: D1805 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	5		2	0	0	4													
Mailing Address 1621 S Main St		Amount of Each Disbursement this Period <table border="1"> <tr> <td>221.64</td> </tr> </table>	221.64																			
221.64																						
City Burlington	State IA		Zip Code 52601-6124																			
Purpose of Disbursement Net payroll			<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																		
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) Jayme A Sime		Transaction ID: D1806 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	9		2	0	0	4													
Mailing Address 1621 S Main St		Amount of Each Disbursement this Period <table border="1"> <tr> <td>526.39</td> </tr> </table>	526.39																			
526.39																						
City Burlington	State IA		Zip Code 52601-6124																			
Purpose of Disbursement Net payroll			<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																		
Category/ Type																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)

1156.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 172 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Steven S Sloan		Transaction ID: D1808 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>
Mailing Address 205 14th St SE Apt 305		Amount of Each Disbursement this Period <div>813.50</div>
City Cedar Rapids State IA Zip Code 52403-4068		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Shannon R Smith		Transaction ID: D1809 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 3865 Woodland Ave Apt 5		Amount of Each Disbursement this Period <div>197.40</div>
City West Des Moines State IA Zip Code 50266-1986		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Shannon R Smith		Transaction ID: D1810 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 3865 Woodland Ave Apt 5		Amount of Each Disbursement this Period <div>376.43</div>
City West Des Moines State IA Zip Code 50266-1986		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1387.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 173 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Leslie Ann Spring		Transaction ID: D1811 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 2819 N Main St		Amount of Each Disbursement this Period <div>172.70</div>
City Davenport State IA Zip Code 52803-1127		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Leslie Ann Spring		Transaction ID: D1812 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 2819 N Main St		Amount of Each Disbursement this Period <div>380.90</div>
City Davenport State IA Zip Code 52803-1127		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Thomas F Stewart		Transaction ID: D1813 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 300 W Penn St		Amount of Each Disbursement this Period <div>180.93</div>
City Williamsburg State IA Zip Code 52361-9460		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div>734.53</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 174 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Thomas F Stewart

Mailing Address 300 W Penn St

City Williamsburg State IA Zip Code 52361-9460

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1814

Date of Disbursement

/ /

Amount of Each Disbursement this Period

428.87

Full Name (Last, First, Middle Initial)

B. Jennifer C Stokes

Mailing Address 517 S Governor St

City Iowa City State IA Zip Code 52240-5624

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1816

Date of Disbursement

/ /

Amount of Each Disbursement this Period

937.19

Full Name (Last, First, Middle Initial)

C. Jesse Tangkhanya

Mailing Address 1123 E Linden Dr

City Mt Pleasant State IA Zip Code 52641-2728

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1817

Date of Disbursement

/ /

Amount of Each Disbursement this Period

221.64

SUBTOTAL of Disbursements This Page (optional)

1587.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 175 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Jesse Tangkhpanya		Transaction ID: D1818 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 1123 E Linden Dr			
City Mt Pleasant	State IA	Zip Code 52641-2728	Amount of Each Disbursement this Period <div>488.53</div>
Purpose of Disbursement Net payroll		<div>Category/Type</div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) James M Thompson		Transaction ID: D1820 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address 3619 Gunston Rd			
City Alexandria	State VA	Zip Code 22302-2007	Amount of Each Disbursement this Period <div>813.50</div>
Purpose of Disbursement Net payroll		<div>Category/Type</div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Matthew L Thompson		Transaction ID: D1821 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 2522 Pierce Ave			
City Ames	State IA	Zip Code 50010-4415	Amount of Each Disbursement this Period <div>197.40</div>
Purpose of Disbursement Net payroll		<div>Category/Type</div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

1499.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 176 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Matthew L Thompson

Mailing Address 2522 Pierce Ave

City Ames State IA Zip Code 50010-4415

Purpose of Disbursement
Net payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1822

Date of Disbursement

/ /

Amount of Each Disbursement this Period

501.46

Full Name (Last, First, Middle Initial)

B. Treasurer, State of Iowa

Mailing Address PO Box 10412

City Des Moines State IA Zip Code 50306-0412

Purpose of Disbursement
State withholding deposit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1823

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1325.00

Full Name (Last, First, Middle Initial)

C. Treasurer, State of Iowa

Mailing Address PO Box 10412

City Des Moines State IA Zip Code 50306-0412

Purpose of Disbursement
State withholding deposit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1550

Date of Disbursement

/ /

Amount of Each Disbursement this Period

298.00

SUBTOTAL of Disbursements This Page (optional)

2124.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 177 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Jacob W Trumm		Transaction ID: D1824 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 106 N Governor St		Amount of Each Disbursement this Period <div>182.70</div>	
City Iowa City	State IA		Zip Code 52245-2614
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Jacob W Trumm		Transaction ID: D1825 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 106 N Governor St		Amount of Each Disbursement this Period <div>439.45</div>	
City Iowa City	State IA		Zip Code 52245-2614
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Christian Urrutia		Transaction ID: D1826 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 630 N Dubuque St		Amount of Each Disbursement this Period <div>184.70</div>	
City Iowa City	State IA		Zip Code 52245-1915
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<div>806.85</div>	
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 178 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Christian Urrutia		Transaction ID: D1827 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 630 N Dubuque St		Amount of Each Disbursement this Period <div>489.45</div>
City Iowa City State IA Zip Code 52245-1915		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Emily M Van Norman		Transaction ID: D1828 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 2515 Tremont St		Amount of Each Disbursement this Period <div>189.17</div>
City Cedar Falls State IA Zip Code 50613-3950		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Emily M Van Norman		Transaction ID: D1829 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 2515 Tremont St		Amount of Each Disbursement this Period <div>390.90</div>
City Cedar Falls State IA Zip Code 50613-3950		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional) ►		<div>1069.52</div>
TOTAL This Period (last page this line number only) ►		<div></div>

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 179 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Jason D Van Zee		Transaction ID: D1830 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 2555 Oxford Ln NW Apt 4		Amount of Each Disbursement this Period <div>145.38</div>
City Cedar Rapids State IA Zip Code 52405-1183		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Jason D Van Zee		Transaction ID: D1831 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 2555 Oxford Ln NW Apt 4		Amount of Each Disbursement this Period <div>380.04</div>
City Cedar Rapids State IA Zip Code 52405-1183		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Renner K Walker		Transaction ID: D1832 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 1922 80th St		Amount of Each Disbursement this Period <div>199.40</div>
City Windsor Heights State IA Zip Code 50322-5604		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div>724.82</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 180 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Renner K Walker		Transaction ID: D1833 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 1922 80th St		Amount of Each Disbursement this Period <div>412.14</div>
City Windsor Heights	State IA Zip Code 50322-5604	
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Megan M Weddingfeld		Transaction ID: D1834 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 5643 Kirkwood Blvd SW		Amount of Each Disbursement this Period <div>189.17</div>
City Cedar Rapids	State IA Zip Code 52404-8233	
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Megan M Weddingfeld		Transaction ID: D1835 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 5643 Kirkwood Blvd SW		Amount of Each Disbursement this Period <div>362.82</div>
City Cedar Rapids	State IA Zip Code 52404-8233	
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

964.13

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 181 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Jessie R Weishaar		Transaction ID: D1837 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address 1516 Otley Ave			
City Perry	State IA	Zip Code 50220-1751	Amount of Each Disbursement this Period <div>815.10</div>
Purpose of Disbursement Net payroll		<input type="checkbox"/> Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Wellmark		Transaction ID: D1838 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address PO Box 10353			
City Des Moines	State IA	Zip Code 50306-0353	Amount of Each Disbursement this Period <div>689.59</div>
Purpose of Disbursement Health insurance		<input type="checkbox"/> Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Andrew J Wenthe		Transaction ID: D1840 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>	
Mailing Address 4410 University Ave Apt 217			
City Cedar Falls	State IA	Zip Code 50613-6220	Amount of Each Disbursement this Period <div>813.50</div>
Purpose of Disbursement Net payroll		<input type="checkbox"/> Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<div>2318.19</div>	
TOTAL This Period (last page this line number only)		<div></div>	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 182 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Jordana C Wessling		Transaction ID: D1841 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	5		2	0	0	4													
Mailing Address 4605 Chamberlain Dr		Amount of Each Disbursement this Period <table border="1"> <tr> <td>193.93</td> </tr> </table>	193.93																			
193.93																						
City Des Moines State IA Zip Code 50312-2218																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) Jordana C Wessling		Transaction ID: D1842 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	9		2	0	0	4													
Mailing Address 4605 Chamberlain Dr		Amount of Each Disbursement this Period <table border="1"> <tr> <td>189.32</td> </tr> </table>	189.32																			
189.32																						
City Des Moines State IA Zip Code 50312-2218																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) Gabriel J Whitaker		Transaction ID: D1843 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	9		2	0	0	4													
Mailing Address 204 Jewel Dr Apt 5		Amount of Each Disbursement this Period <table border="1"> <tr> <td>140.76</td> </tr> </table>	140.76																			
140.76																						
City Ames State IA Zip Code 50010-8576																						
Purpose of Disbursement Net payroll	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
SUBTOTAL of Disbursements This Page (optional)		<table border="1"> <tr> <td>524.01</td> </tr> </table>	524.01																			
524.01																						
TOTAL This Period (last page this line number only)		<table border="1"> <tr> <td></td> </tr> </table>																				

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 183 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Zachary J White		Transaction ID: D1844 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 821 W 28th St		Amount of Each Disbursement this Period <div>189.17</div>	
City Cedar Falls	State IA		Zip Code 50613-5018
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Zachary J White		Transaction ID: D1845 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 821 W 28th St		Amount of Each Disbursement this Period <div>390.90</div>	
City Cedar Falls	State IA		Zip Code 50613-5018
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Michael J Wiegand		Transaction ID: D1846 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 1242 42nd St		Amount of Each Disbursement this Period <div>193.93</div>	
City Des Moines	State IA		Zip Code 50311-2527
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<div>774.00</div>	
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 184 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Michael J Wiegand Full Name (Last, First, Middle Initial) Mailing Address 1242 42nd St City Des Moines State IA Zip Code 50311-2527 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1847 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4 Amount of Each Disbursement this Period 401.73
B. Aaron M Wilds Full Name (Last, First, Middle Initial) Mailing Address 411 S 38th Ave City Omaha State NE Zip Code 68131-3808 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1848 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4 Amount of Each Disbursement this Period 92.35
C. Kathryn M Williams Full Name (Last, First, Middle Initial) Mailing Address 7 Wenwood Ct City Council Bluffs State IA Zip Code 51503-5127 Purpose of Disbursement Net payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D1849 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 4 Amount of Each Disbursement this Period 182.70
SUBTOTAL of Disbursements This Page (optional)		676.78
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 185 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Kathryn M Williams		Transaction ID: D1850 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 7 Wenwood Ct		Amount of Each Disbursement this Period <div>380.57</div>	
City Council Bluffs	State IA		Zip Code 51503-5127
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Michael J Wolfe		Transaction ID: D1851 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>	
Mailing Address 1070 50th St Unit 1D		Amount of Each Disbursement this Period <div>212.40</div>	
City West Des Moines	State IA		Zip Code 50266-4900
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Michael J Wolfe		Transaction ID: D1852 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>	
Mailing Address 1070 50th St Unit 1D		Amount of Each Disbursement this Period <div>434.05</div>	
City West Des Moines	State IA		Zip Code 50266-4900
Purpose of Disbursement Net payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

1027.02

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 186 / 210

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Jon M Woodruff		Transaction ID: D1853 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 1243 34th St		Amount of Each Disbursement this Period <div>189.32</div>
City Des Moines	State IA Zip Code 50311-2701	
Purpose of Disbursement Net payroll		
Candidate Name		
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Jon M Woodruff		Transaction ID: D1854 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 1243 34th St		Amount of Each Disbursement this Period <div>420.19</div>
City Des Moines	State IA Zip Code 50311-2701	
Purpose of Disbursement Net payroll		
Candidate Name		
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Jeffrey D Yanecek		Transaction ID: D1856 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 4</div> </div>
Mailing Address 785 Prospect Ct		Amount of Each Disbursement this Period <div>874.41</div>
City North Liberty	State IA Zip Code 52317-9128	
Purpose of Disbursement Net payroll		
Candidate Name		
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1483.92

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 187 / 210

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) Aaron S Zoellick		Transaction ID: D1857 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 4</div> </div>
Mailing Address 650 Orchard Ct		Amount of Each Disbursement this Period <div>184.70</div>
City Iowa City State IA Zip Code 52246-5534		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Aaron S Zoellick		Transaction ID: D1858 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 4</div> </div>
Mailing Address 650 Orchard Ct		Amount of Each Disbursement this Period <div>489.45</div>
City Iowa City State IA Zip Code 52246-5534		
Purpose of Disbursement Net payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

674.15

TOTAL This Period (last page this line number only) ►

119229.10

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 188 / 210

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Iowa Democratic Party - State Account

Nature of Debt (Purpose):
Non-Federal Contribution
owed to NF acco

Mailing Address 5661 Fleur Dr

City	State	ZIP Code
Des Moines	IA	50321-2841

Outstanding Balance Beginning This Period

1200.00

Transaction ID: D16550

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1200.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

1200.00

2) **TOTALS** This Period (last page this line number only)..... ▶

1200.00

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 189 / 210
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 IOWA DEMOCRATIC PARTY

NAME OF ACCOUNT
 Iowa Democratic Party

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 6 / 2 9 / 2 0 0 4

TOTAL AMOUNT TRANSFERRED

45000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

45000.00

Transaction ID: T10

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 190 / 210
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 IOWA DEMOCRATIC PARTY

NAME OF ACCOUNT
 IDP Non-Federal Ac-
 count

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 0 4

TOTAL AMOUNT TRANSFERRED

5800.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

5800.00

Transaction ID: T25

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

50800.00

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

50800.00

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 191 / 210
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Acuity Insurance

Mailing Address

PO Box 718

City State Zip Code
 Sheboygan WI 53082-0718

Purpose of Disbursement:
 Insurance premium

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date M M / D D / Y Y Y Y
 0 6 / 1 0 / 2 0 0 4

Transaction ID: D1482H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
844.30		1500.99		2345.29

B. Full Name (Last, First, Middle Initial)
 American Express

Mailing Address

Suite 1

City State Zip Code
 Chicago IL 60679-0001

Purpose of Disbursement:
 Credit card fee

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date M M / D D / Y Y Y Y
 0 6 / 0 1 / 2 0 0 4

Transaction ID: D1464H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.03		1.82		2.85

C. Full Name (Last, First, Middle Initial)
 Boone County Auditor

Mailing Address

201 State St

City State Zip Code
 Boone IA 50036-3922

Purpose of Disbursement:
 Precinct maps

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date M M / D D / Y Y Y Y
 0 6 / 1 0 / 2 0 0 4

Transaction ID: D1483H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
.54		.96		1.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
845.87		1503.77		2349.64

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 192 / 210
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

James D Boyd

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

Mailing Address

2920 Kingman Blvd

City

State

Zip Code

Des Moines

IA

50311-3913

Purpose of Disbursement:

Cleaning service

Category/
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Activity or Event Identifier:

Administrative

Date

M M

0 6

D D

0 3

Y Y

2 0

Y Y

0 4

Transaction ID: D1474H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

33.33

59.26

92.59

B. Full Name (Last, First, Middle Initial)

CDW Direct

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

Mailing Address

PO Box 75723

City

State

Zip Code

Chicago

IL

60675-5723

Purpose of Disbursement:

Palm Pilots

Category/
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Activity or Event Identifier:

Administrative

Date

M M

0 6

D D

1 7

Y Y

2 0

Y Y

0 4

Transaction ID: D1515H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

8520.02

15146.70

23666.72

C. Full Name (Last, First, Middle Initial)

Cerro Gordo County Democratic Central

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

Mailing Address

943 6th St SE

City

State

Zip Code

Mason City

IA

50401-4261

Purpose of Disbursement:

Field office rent

Category/
Type☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Activity or Event Identifier:

Administrative

Date

M M

0 6

D D

0 1

Y Y

2 0

Y Y

0 4

Transaction ID: D1465H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

72.00

128.00

200.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

8625.35

15333.96

23959.31

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 193 / 210
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Clinton County Auditor

Mailing Address
 PO Box 2957

City	State	Zip Code
Clinton	IA	52733-2957

Purpose of Disbursement:
 County maps

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M	M
0	6

 /

D	D
1	0

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: D1484H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.60		6.40		10.00

B. Full Name (Last, First, Middle Initial)
 Decorah Community School

Mailing Address
 510 Winnebago St

City	State	Zip Code
Decorah	IA	52101-1842

Purpose of Disbursement:
 Meeting room rent

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M	M
0	6

 /

D	D
1	0

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: D1485H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.93		38.99		60.92

C. Full Name (Last, First, Middle Initial)
 Delaware County Auditor

Mailing Address
 301 E Main St

City	State	Zip Code
Manchester	IA	52057-1738

Purpose of Disbursement:
 Precinct maps

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M	M
0	6

 /

D	D
1	0

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: D1486H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
.81		1.44		2.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.34		46.83		73.17

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 194 / 210
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Des Moines Waterworks

Mailing Address

2201 George Flagg Pkwy

City	State	Zip Code
Des Moines	IA	50321-1174

Purpose of Disbursement:
 Water & Sewer

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date 06 / 10 / 2004

Transaction ID: D1487H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.88		54.91		85.79

B. Full Name (Last, First, Middle Initial)
 Dubuque County Auditor

Mailing Address

1198 White St

City	State	Zip Code
Dubuque	IA	52001-5036

Purpose of Disbursement:
 Precinct maps

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date 06 / 10 / 2004

Transaction ID: D1488H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.70		4.80		7.50

C. Full Name (Last, First, Middle Initial)
 Dubuque County Democratic Central Comm

Mailing Address

1638 Iowa Street

City	State	Zip Code
Dubuque	IA	52001

Purpose of Disbursement:
 Rent for field office

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date 06 / 01 / 2004

Transaction ID: D1466H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
144.00		256.00		400.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.58		315.71		493.29

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 195 / 210
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Feaster, Inc

Mailing Address

PO Box 281 PO Box 281

City State Zip Code
 Grimes IA 50111-0281

Purpose of Disbursement:
 Field Office Property Insurance - Locust

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date 06 / 01 / 2004

Transaction ID: D1467H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

76.32

135.68

212.00

B. Full Name (Last, First, Middle Initial)
 Feaster, Inc

Mailing Address

PO Box 281 PO Box 281

City State Zip Code
 Grimes IA 50111-0281

Purpose of Disbursement:
 Field Office Rent - 1408 Locust

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date 06 / 01 / 2004

Transaction ID: D1468H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

720.00

1280.00

2000.00

C. Full Name (Last, First, Middle Initial)
 Ben K Foecke

Mailing Address

3333 Grand Ave Apt 272

City State Zip Code
 Des Moines IA 50312-4163

Purpose of Disbursement:
 Lunch for trainees

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date 06 / 07 / 2004

Transaction ID: D1480H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

140.33

249.49

389.82

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

936.65

1665.17

2601.82

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 196 / 210
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 GE Capital

Mailing Address

PO Box 740441

City	State	Zip Code
Atlanta	GA	30374-0441

Purpose of Disbursement:
 Copier Equipment Lease

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date 06 / 15 / 2004

Transaction ID: D1508H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
232.62		413.55		646.17

B. Full Name (Last, First, Middle Initial)
 Hewlett-Packard

Mailing Address

PO Box 402106

City	State	Zip Code
Atlanta	GA	30384-2106

Purpose of Disbursement:
 Computers

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date 06 / 25 / 2004

Transaction ID: D1519H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7358.81		13082.33		20441.14

C. Full Name (Last, First, Middle Initial)
 Johnson County Democratic Central Comm

Mailing Address

917 Bowery Street

City	State	Zip Code
Iowa City	IA	52240

Purpose of Disbursement:
 Rent for field office

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date 06 / 01 / 2004

Transaction ID: D1469H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.00		320.00		500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7771.43		13815.88		21587.31

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 197 / 210
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Koch Brothers

Mailing Address
 PO Box 1755

City State Zip Code
 Des Moines IA 50306-1755

Purpose of Disbursement:
 Copy machine maintenance contract

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date M M / D D / Y Y Y Y
 06 / 10 / 2004

Transaction ID: D1490H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 85.86		<input type="text"/> 152.64		<input type="text"/> 238.50

B. Full Name (Last, First, Middle Initial)
 LaserQuipt

Mailing Address
 5500 NW Johnston Dr Ste C-D-E

City State Zip Code
 Johnston IA 50131-1382

Purpose of Disbursement:
 Printer repairs

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date M M / D D / Y Y Y Y
 06 / 10 / 2004

Transaction ID: D1491H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 22.66		<input type="text"/> 40.29		<input type="text"/> 62.95

C. Full Name (Last, First, Middle Initial)
 Mahaska County Auditor

Mailing Address
 106 S 1st St

City State Zip Code
 Oskaloosa IA 52577-3101

Purpose of Disbursement:
 Precinct map

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date M M / D D / Y Y Y Y
 06 / 06 / 2004

Transaction ID: D1479H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 1.80		<input type="text"/> 3.20		<input type="text"/> 5.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 110.32		<input type="text"/> 196.13		<input type="text"/> 306.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 198 / 210
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Mahaska County Auditor

Mailing Address

106 S 1st St

City

State

Zip Code

Oskaloosa

IA

52577-3101

Purpose of Disbursement:
 Precinct map

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 4

Transaction ID: D1492H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1.80

3.20

5.00

B. Full Name (Last, First, Middle Initial)
 Mediacom

Mailing Address

PO Box 94310

City

State

Zip Code

Palatine

IL

60094-4310

Purpose of Disbursement:
 Cable TV service

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 4

Transaction ID: D1493H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

68.68

122.12

190.80

C. Full Name (Last, First, Middle Initial)
 MidAmerican Energy

Mailing Address

PO Box 8020

City

State

Zip Code

Davenport

IA

52808-8020

Purpose of Disbursement:
 Utilities

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 4

Transaction ID: D1495H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

336.15

597.62

933.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

406.63

722.94

1129.57

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 199 / 210
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
MidAmerican Energy

 Mailing Address
PO Box 8020

 City State Zip Code
Davenport IA 52808-8020

 Purpose of Disbursement:
Utilities
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

 Date M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 4

Transaction ID: D1494H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
466.65		829.62		1296.27

B. Full Name (Last, First, Middle Initial)
Pratt Audio-Visual

 Mailing Address
333 SW 9th St Ste N

 City State Zip Code
Des Moines IA 50309-4440

 Purpose of Disbursement:
Equipment rent for Hall of Fame
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

 Date M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 4

Transaction ID: D1535H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.01		4.79		79.80

C. Full Name (Last, First, Middle Initial)
Qwest

 Mailing Address
PO Box 91104

 City State Zip Code
Seattle WA 98111-9204

 Purpose of Disbursement:
Telephone deposit
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

 Date M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 4

Transaction ID: D1527H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1620.00		2880.00		4500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2161.66		3714.41		5876.07

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 200 / 210
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address

PO Box 91104

City	State	Zip Code
Seattle	WA	98111-9204

Purpose of Disbursement:
 DSL service

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M	M
0	6

 /

D	D
1	0

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: D1497H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.16		76.72		119.88

B. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address

PO Box 91104

City	State	Zip Code
Seattle	WA	98111-9204

Purpose of Disbursement:
 Telephone wiring & jacks

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M	M
0	6

 /

D	D
1	0

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: D1496H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.60		294.40		460.00

C. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address

PO Box 91104

City	State	Zip Code
Seattle	WA	98111-9204

Purpose of Disbursement:
 Telephone deposit

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M	M
0	6

 /

D	D
2	4

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: D1517H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
216.00		384.00		600.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
424.76		755.12		1179.88

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 201 / 210
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Qwest

Mailing Address

PO Box 91104

City	State	Zip Code
Seattle	WA	98111-9204

 Purpose of Disbursement:
Telephone service
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	4

Transaction ID: D1526H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
139.68		248.32		388.00

B. Full Name (Last, First, Middle Initial)
Qwest

Mailing Address

PO Box 91104

City	State	Zip Code
Seattle	WA	98111-9204

 Purpose of Disbursement:
Telephone service
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	4	/	2	0	0	4

Transaction ID: D1518H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.19		46.56		72.75

C. Full Name (Last, First, Middle Initial)
Sandler, Reiff and Young

Mailing Address

50 E St SE Ste 300

City	State	Zip Code
Washington	DC	20003-2620

 Purpose of Disbursement:
Legal retainer
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	0	4

Transaction ID: D1510H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
144.00		256.00		400.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
309.87		550.88		860.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 202 / 210
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Scott County Democratic Central Commit

Mailing Address
 3330 Tremont

City State Zip Code
 Davenport IA 52803

Purpose of Disbursement:
 Rent for field office

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date MM / DD / YYYY
 06 / 01 / 2004

Transaction ID: D1470H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
162.00		288.00		450.00

B. Full Name (Last, First, Middle Initial)
 Sprint PCS

Mailing Address
 4520 University Ave

City State Zip Code
 West Des Moines IA 50266-1070

Purpose of Disbursement:
 Cell phone service

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date MM / DD / YYYY
 06 / 10 / 2004

Transaction ID: D1499H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.07		39.25		61.32

C. Full Name (Last, First, Middle Initial)
 Storey Kenworthy

Mailing Address
 309 Locust St

City State Zip Code
 Des Moines IA 50309-1723

Purpose of Disbursement:
 Office supplies & small equipment

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date MM / DD / YYYY
 06 / 10 / 2004

Transaction ID: D1500H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2248.12		3996.67		6244.79

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2432.19		4323.92		6756.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 203 / 210
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Story County Democratic Central Commit

Mailing Address

2800 Pinehurst Cir

City

State

Zip Code

Ames

IA

50010-4562

Purpose of Disbursement:
 Rent for field office

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 4

Transaction ID: D1511H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

252.00

448.00

700.00

B. Full Name (Last, First, Middle Initial)
 Strauss Lock

Mailing Address

PO Box 42367

City

State

Zip Code

Urbandale

IA

50323-0986

Purpose of Disbursement:
 Repair door lock and replace keys

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 4

Transaction ID: D1501H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

64.62

114.88

179.50

C. Full Name (Last, First, Middle Initial)
 Stroh Corporation

Mailing Address

5000 Park Ave

City

State

Zip Code

Des Moines

IA

50321-1245

Purpose of Disbursement:
 Building maintenance contract

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 4

Transaction ID: D1512H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

102.20

181.70

283.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

418.82

744.58

1163.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 204 / 210
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Patricia Touar

Mailing Address

828 Scott Ave

City

State

Zip Code

Des Moines

IA

50309-5054

Purpose of Disbursement:

Child care at state convention

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date 06 / 29 / 2004

Transaction ID: D1523H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

39.60

70.40

110.00

B. Full Name (Last, First, Middle Initial)

Tri-City Electric

Mailing Address

10520 Hickman Rd

City

State

Zip Code

Des Moines

IA

50325-3712

Purpose of Disbursement:

Telephone system rent

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date 06 / 10 / 2004

Transaction ID: D1502H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

331.22

588.86

920.08

C. Full Name (Last, First, Middle Initial)

U.S. Coffee

Mailing Address

5140 Park Ave

Ste J

City

State

Zip Code

Des Moines

IA

50321-1280

Purpose of Disbursement:

Coffee & bottled water

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date 06 / 10 / 2004

Transaction ID: D1503H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

67.87

120.68

188.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

438.69

779.94

1218.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 205 / 210
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 United Parcel Service

Mailing Address

PO Box 577

City	State	Zip Code
Carol Stream	IL	60132-0001

Purpose of Disbursement:
 Shipping

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M	M
0	6

 /

D	D
2	5

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: D1520H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
725.32		1289.46		2014.78

B. Full Name (Last, First, Middle Initial)
 United States Postal Service

Mailing Address

1165 2nd Ave

City	State	Zip Code
Des Moines	IA	50318-9704

Purpose of Disbursement:
 Postage stamps

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M	M
0	6

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: D1529H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
532.80		947.20		1480.00

C. Full Name (Last, First, Middle Initial)
 United States Postal Service

Mailing Address

1165 2nd Ave

City	State	Zip Code
Des Moines	IA	50318-9704

Purpose of Disbursement:
 Standard mail deposit

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M	M
0	6

 /

D	D
0	3

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: D1475H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
720.00		1280.00		2000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1978.12		3516.66		5494.78

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 206 / 210
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
United States Postal Service

 Mailing Address
1165 2nd Ave

City	State	Zip Code
Des Moines	IA	50318-9704

 Purpose of Disbursement:
Postage stamps

 Category/
Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	4	/	2	0	0	4

Transaction ID: D1476H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
333.00		592.00		925.00

B. Full Name (Last, First, Middle Initial)
United States Postal Service

 Mailing Address
1165 2nd Ave

City	State	Zip Code
Des Moines	IA	50318-9704

 Purpose of Disbursement:
Standard mail deposit

 Category/
Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	9	/	2	0	0	4

Transaction ID: D1481H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
720.00		1280.00		2000.00

C. Full Name (Last, First, Middle Initial)
United States Postal Service

 Mailing Address
1165 2nd Ave

City	State	Zip Code
Des Moines	IA	50318-9704

 Purpose of Disbursement:
Postage stamps

 Category/
Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	4	/	2	0	0	4

Transaction ID: D1506H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
399.60		710.40		1110.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1452.60		2582.40		4035.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 207 / 210
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Verizon

Mailing Address

PO Box 790406

City

State

Zip Code

Saint Louis

MO

63179-0406

Purpose of Disbursement:

Cell phone service

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M M / D D / Y Y Y Y

0 6 / 1 0 / 2 0 0 4

Transaction ID: D1504H4

Activity or Event Identifier:
Administrative

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

470.30

836.08

1306.38

B. Full Name (Last, First, Middle Initial)

Voxeo Corporation

Mailing Address

100 E Pine St

Ste 600

City

State

Zip Code

Orlando

FL

32801-2761

Purpose of Disbursement:

Web hosting service

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M M / D D / Y Y Y Y

0 6 / 1 0 / 2 0 0 4

Transaction ID: D1505H4

Activity or Event Identifier:
Administrative

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

180.00

320.00

500.00

C. Full Name (Last, First, Middle Initial)

Waste Connections

Mailing Address

Des Moines District

3071

City

State

Zip Code

Los Angeles

CA

90084-1433

Purpose of Disbursement:

Trash & recycling service

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M M / D D / Y Y Y Y

0 6 / 1 5 / 2 0 0 4

Transaction ID: D1513H4

Activity or Event Identifier:
Administrative

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

73.96

131.48

205.44

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

724.26

1287.56

2011.82

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 208 / 210
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Waste Connections

Mailing Address

Des Moines District 3071

City	State	Zip Code
Los Angeles	CA	90084-1433

Purpose of Disbursement:
 Trash & recycling service

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M	M
0	6

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: D1514H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.96		131.48		205.44

B. Full Name (Last, First, Middle Initial)
 Nathan Zoromski

Mailing Address

219 Ash Ave

City	State	Zip Code
Ames	IA	50014-7114

Purpose of Disbursement:
 Mileage allowance

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M	M
0	6

 /

D	D
0	4

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: D1478H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.03		90.72		141.75

C. Full Name (Last, First, Middle Initial)
 Nathan Zoromski

Mailing Address

219 Ash Ave

City	State	Zip Code
Ames	IA	50014-7114

Purpose of Disbursement:
 Mileage allowance

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

304522.56

Date

M	M
0	6

 /

D	D
2	8

 /

Y	Y	Y	Y
2	0	0	4

Transaction ID: D1522H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.16		51.84		81.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
154.15		274.04		428.19

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
29395.29	52129.90	81525.19

SCHEDULE L (FEC Form 3X)

209 / 210

AGGREGATION PAGE: LEVIN FUNDSTransaction ID: **SchedL141**NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTYNAME OF ACCOUNT
Levin Designations & Expenditures

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	100.00
c. Total.....	0.00	100.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	100.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	0.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	100.00	0.00
8. RECEIPTS..... (from Line 3)	0.00	100.00
9. SUBTOTAL..... (Add Lines 7 and 8)	100.00	100.00
10. DISBURSEMENTS..... (From Line 6)	0.00	0.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)		100.00

Image# 26930171823

Form/Schedule: **SB22**

Transfer for Kevin McCarthy Committee and the Mertz for Rep. Committee.

Transaction ID: **D16675**
